02/18/2010 14:19

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FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee Office Use Only 1. NAME OF **USE FEC MAILING LABEL** Example:If typing, type COMMITTEE (in full) OR TYPE OR PRINT over the lines American College of Radiology Association Political Action Committee 1891 Preston White Drive ADDRESS (number and street) Check if different than previously Reston ٧A 20191 reported. (ACC) FEC IDENTIFICATION NUMBER STATE A ZIPCODE A CITY A IS THIS NEW **AMENDED** C00343459 Χ REPORT OR (N) (A) **TYPE OF REPORT** (b) Monthly Nov 20 (M11) Feb 20 (M2) May 20 (M5) Aug 20 (M8) (Non-Election Year Only) Report (Choose One) Due On: Dec 20 (M12) (Non-Election Year Only) Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) (a) Quarterly Reports: Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE) April 15 Quarterly Report(Q1) 12-Day (c) Primary (12P) General (12G) Runoff (12R) July 15 PRE-Election Quarterly Report(Q2) Report for the: Convention (12C) Special (12G) October 15 Quarterly Report(Q3) January 31 Quarterly Report(YE) in the Election on State of July 31 Mid-Year (d) 30-Day Report(Non-election Year Only) (MY) Runoff (30R) Post -Election General (30G) Special (30S) Report for the: Termination Report (TER) in the Election on State of 0 1 0 1 2010 0 1 3 1 2010 through Covering Period I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete. DR William Herrington Type or Print Name of Treasurer Electronically Filed by DR William Herrington 02 18 2010 Signature of Treasurer Date NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g. Office **FEC FORM 3X** Use (Rev. 12/2004)

FE6AN026

Only

Report Covering the Period:

FEC Form 3X (Rev. 02/2003)

From:

SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS

To:

2 / 70

Write or Type Committee Name American College of Radiology Association Political Action Committee D D 0 1 2 0 1 0 ^D 31 м м 0 1 м м 0 1 2010

_	COLUMN A This Period	COLUMN B Calendar Year-to-Date
. (a) Cash on Hand January 1 2010 Y Y Y		532260.11
(b) Cash on Hand at Begining of Reporting Period	532260.11	
(c) Total Receipts (from Line 19)	157344.30	157344.30
(d) Subtotal (add lines 6(b) and		
6(c) for Column A and Lines 6(a) and 6(c) for Column B)	689604.41	689604.41
. Total Disbursements (from Line 31)	43547.36	43547.36
Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	646057.05	646057.05
Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00	
0. Debts and Obligations owed the committee (Itemize all on Schedule C and/or Schedule D)	0.00	

For further information contact:

X This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

Federal Election Commission 999 E street, NW Washington, DC 20463

Toll Free 800-424-9530 Local 202-694-1100

DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 06/2004) 3 / 70

Write or Type Committee Name

American College of Radiology Association Political Action Committee

м м 0 1

Report Covering the Period:

From:

D D 0 1

2010

То:

м м 0 1 D D 31

Y Y Y Y 2 0 1 0

	I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
	tributions (other than loans) From: Individuals/Persons Other		
	Than Political Committees (i) Itemized (use Schedule A)	133816.33	133816.33
	(ii) Unitemized	21022.84	21022.84
	(iii) TOTAL (add Lines 11(a)(i) and (ii)	154839.17	154839.17
(b)	Political Party Committees	0.00	0.00
(c)	Other Political Committees (such as PACs) Total Contributions (add Lines	0.00	0.00
	11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	154839.17	154839.17
	nsfers From Affiliated/Other y Committees	0.00	0.00
3. All L	oans Received	0.00	0.00
4. Loar 5. Offs	n Repayments Received sets To Operating Expenditures	0.00	0.00
(Car	funds, Rebates, etc.) rry Totals to Line 37, page 5) unds of Contributions Made	0.00	0.00
	ederal candidates and Other tical Committees	2500.00	2500.00
	er Federal Receipts idends, Interest, etc.)	5.13	5.13
8. Trar	nsfers from Non-Federal and Levin Funds		
` '	Non-Federal Account (from Schedule H3)	0.00	0.00
(b) L	Levin Funds (from Schedule H5)	0.00	0.00
(c) T	otal Transfer (add 18(a) and 18(b)).	0.00	0.00
	Il Receipts (add Lines 11(d), 13, 14, 15, 16, 17, and 18(c))	157344.30	157344.30
	I Federal Receipts tract Line 18(c) from Line 19)	157344.30	157344.30

DETAILED SUMMARY PAGE

FEC Form 3X (Rev. 02/2003)

of Disbursements

4 / 70

	II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21.	Operating Expenditures: (a) Shared Federal/Non-Federal		
	Activity (from Schedule H4)	0.00	0.00
	(i) Federal Share		
	(ii) Non-Federal Share	0.00	0.00
	(b) Other Federal Operating	0.00	0.00
	Expenditures(c) Total Operating Expenditures	0.00	0.00
	(add 21(a)(i), (a)(ii) and (b))	0.00	0.00
22.	Transfers to Affiliated/Other Party	0.00	0.00
23.	Committees Contributions to	0.00	0.00
	Federal Candidates/Committeesand Other Political Committees	43000.00	43000.00
24.	Independent Expenditure	0.00	0.00
5.	(use Schedule E)	5.00	0.00
	Committees (2 U.S.C. 441a(d)) (use Schedule F)	0.00	0.00
26.	Loan Repayments Made	0.00	0.00
7	Loans Made	0.00	0.00
	Refunds of Contributions To:	0.00	0.00
	(a) Individuals/Persons Other Than Political Committees	0.00	0.00
	(b) Political Party Committees	0.00	0.00
	(c) Other Political Committees		
	(such as PACs)	0.00	0.00
	(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00
	(add Lines 20(a), (b), and (c))		
29.	Other Disbursements	547.36	547.36
30.	Federal Election Activity (2 U.S.C 431(20))		
	(a) Shared Federal Election Activity		
	(from Schedule H6) (i) Federal Share	0.00	0.00
	(i) rederal Strate		
	(ii) "Levin" Share	0.00	0.00
	(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
	(c) Total Federal Election Activity (add	0.00	0.00
	Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
31.	Total Disbursements (add Lines 21(c), 22,		
	23, 24, 25, 26, 27, 28(d), 29 and 30(c))	43547.36	43547.36
32.	Total Federal Disbursements		
	(subtract Line 21(a)(ii) and Line 30(a)(ii)		
	from Line 31)	43547.36	43547.36

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003) 5 / 70

III. Net Contribution		COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other from Line 11(d), page 3)	′	154839.17	154839.17
4. Total Contribution Refun (from Line 28(d))		0.00	0.00
35. Net Contributions (other (subtract Line 34 from Line)	' I	154839.17	154839.17
86. Total Federal Operating (add Line 21(a)(i) and Lin	· .	0.00	0.00
7. Offsets to Operating Exp (from Line 15, page 3)		0.00	0.00
 Net Operating Expenditu (subtract Line 37 from Li 		0.00	0.00

FE6AN026

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 6 / 70 (check only one) X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports and or for commercial purposes, other than using the	Statements ma e name and ad	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American College of Radiology Associ	ciation Politic	al Action Committee	
Α.	Full Name (Last, First, Middle Initial) Dr. Donald Paquet			Date of Receipt
	Mailing Address Associated Radiologis 1125 E Southern Ave			01 08 2010
	City	State	Zip Code	Transaction ID: 33018487
	Mesa	AZ	85204-5046	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer Associated Radiologists Ltd	Occupation Diagnost	n tic Radiologist	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼	0 0	500.00	
В.	Full Name (Last, First, Middle Initial) Dr. Elliot Shoemaker			Date of Receipt
	Mailing Address 4375 Farmington Cir			0 1 0 8 2 0 1 0
	City	State	Zip Code	Transaction ID: 33018488
	Allentown	PA	18104-1962	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer Lehigh Valley Medical Cen- ter	Occupation Diagnost	n tic Radiologist	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼	0 0	250.00	
с. С.	Full Name (Last, First, Middle Initial) Dr. Carolyn Meltzer			Date of Receipt
	Mailing Address Emory University Hos 1364 Clifton Rd Rm D	112		01 08 2010
	City <u>Atlanta</u>	State GA	Zip Code 30322-0001	Transaction ID: 33018489
	FEC ID number of contributing federal political committee.	C	30322-0001	Amount of Each Receipt this Period 500.00
	Name of Employer Emory University	Occupation	n tic Radiologist	
	Receipt For:	, ' 	e Year-to-Date ▼	
	Primary General Other (specify) ▼		500.00]
	SUBTOTAL of Receipts This Page (optional) .		_	1250.00
	TOTAL This Period (last page this line numbe		<u> </u>	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	X)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 7 / 70 (check only one) X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports ar or for commercial purposes, other than using	nd Statements may the name and add	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American College of Radiology Ass	sociation Politic	al Action Committee	
Full Name (Last, First, Middle Initial) Dr. Tanya Rath			Date of Receipt
Mailing Address 11227 Frankstown	Rd		01 08 7 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Penn Hills	State PA	Zip Code 15235-3006	Transaction ID: 33018490 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		500.00
Name of Employer Uinversity of Pittsburg Medical Center Receipt For: Primary General Other (specify)		n ic Radiologist Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Dr. W Jordan Taylor			Date of Receipt
Mailing Address 1231 E 21st PI			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 33018493
Tulsa FEC ID number of contributing federal political committee.	OK C	74114-1204	Amount of Each Receipt this Period 500.00
Name of Employer Radiology Consultants of Tulsa		ic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Dr. Christopher McIntire			Date of Receipt
Mailing Address Radiology Associates of Columbus PO Box 2787		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
City Columbus	State GA	Zip Code 31902-2787	Transaction ID: 33018495 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	01000 2707	250.00
Name of Employer Radiology Associates of Columbus, PC		ic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page (optional			1250.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 8 / 70 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and or for commercial purposes, other than using	d Statements may not be sold or used by any perso the name and address of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American College of Radiology Ass	ociation Political Action Committee	
Full Name (Last, First, Middle Initial) Dr. Michael Metzman		Date of Receipt
Mailing Address 926 Overton Lea Ro		01 08 2010
City Nachvilla	State Zip Code TN 37220-1503	Transaction ID: 33018497
Nashville FEC ID number of contributing federal political committee.	TN 37220-1503	Amount of Each Receipt this Period 365.00
Name of Employer Advanced Diagnostic Imagi- ng, TN	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 365.00	
Full Name (Last, First, Middle Initial) Dr. David Hassell		Date of Receipt
Mailing Address Radiology Associate 6576 Airport Blvd Bl	01 08 7 2010	
City	State Zip Code	Transaction ID: 33018500
Mobile FEC ID number of contributing federal political committee.	AL 36608-3786	Amount of Each Receipt this Period 500.00
Name of Employer Radiology Associates of Mobile	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Dr. Hector Ramirez, JR		Date of Receipt
Mailing Address 7179 SE 94th Ln		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 33018508
<u>Ocala</u>	FL 34472-9245	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Radiology of Huntsville, PC	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page (optional)	1115.00
	per only)	

SCHEDULE A (FEC Form 3X)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 9 / 70 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and or for commercial purposes, other than using to NAME OF COMMITTEE (In Full) American College of Radiology Associations and the commercial purposes, other than using the commercial purposes.	Statements may not be sold or used by any personen name and address of any political committee to ociation Political Action Committee	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Dr. Phillip Moeser Mailing Address 9101 N 60th St City Paradise Valley FEC ID number of contributing federal political committee. Name of Employer John C. Lincoln Health Network Receipt For: Primary General Other (specify)	State Zip Code AZ 85253-1717 C Occupation Diagnostic Radiologist Aggregate Year-to-Date 350.00	Date of Receipt M M M / D D / Y Y Y Y Y O 1 08 2 0 1 0 Transaction ID: 33018583 Amount of Each Receipt this Period 350.00
Full Name (Last, First, Middle Initial) Dr. Richard Duszak, JR Mailing Address 3056 Wetherby Dr City Germantown FEC ID number of contributing federal political committee. Name of Employer Mid South Imaging and Therapeutics Receipt For: Primary General Other (specify)	State Zip Code TN 38139-8080 C Occupation Diagnostic Radiologist Aggregate Year-to-Date 2500.00	Date of Receipt M M M / D D / Y Y Y Y Y O 1
Full Name (Last, First, Middle Initial) Dr. Michael Hauk Mailing Address 700 Lord Rd City Fairview FEC ID number of contributing federal political committee. Name of Employer Hamot Medical Center Receipt For: Primary General Other (specify)	State Zip Code PA 16415-1523 C Occupation Diagnostic Radiologist Aggregate Year-to-Date 250.00	Date of Receipt M M O D D O O O O O O O O O O O O O O O
SUBTOTAL of Receipts This Page (optional)		3100.00

An or		Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 1
	ny information copied from such Reports and S for commercial purposes, other than using the	Statements may not be sold or used by any personame and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American College of Radiology Associ	siation Political Action Committee	
	Full Name (Last, First, Middle Initial) Dr. David Sparks		Date of Receipt
	Mailing Address 131C W Galloway Rd		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State Zip Code	Transaction ID: 33018588
	Jonesborough	TN 37659-3558	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	1000.00
	Name of Employer Blue Ridge Radiology, P.C.	Occupation Diagnostic Radiologist	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
	Full Name (Last, First, Middle Initial) Dr. Elizabeth McFarland	1	Date of Receipt
	Mailing Address 1833 Winter Run		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State Zip Code	Transaction ID: 33018589
	Chesterfield	MO 63017-5674	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	250.00
	Name of Employer Center of Diagnostic Imag- ing	Occupation Diagnostic Radiologist	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
	Full Name (Last, First, Middle Initial) Dr. Alan D. Chan	1	Date of Receipt
	Mailing Address 18875 164th AVE NE		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State Zip Code	Transaction ID: 33037209
	Woodinville	WA 98072-6405	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	224.00
	Name of Employer Radia, Inc.	Occupation Diagnostic Radiologist	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	224.00	
	UBTOTAL of Receipts This Page (optional)	1	1474.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Χ)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 11 / 70 (check only one) X	
Any information copied from such Reports ar or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American College of Radiology Ass	the name and add	dress of any political committee to	on for the purpose of soliciting contributions	
Full Name (Last, First, Middle Initial) Dr. Joseph DeMartini			Date of Receipt	
Mailing Address PO Box 85398 City	State	Zip Code	0 1 1 3 2 0 1 0	
Seattle Seattle	WA	98145-1398	Transaction ID: 33037210 Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.	C		350.00	
Name of Employer Radia, Inc.	Occupation Diagnost	n ic Radiologist		
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 350.00		
Full Name (Last, First, Middle Initial) Dr. Virginia Eschbach Mailing Address 2410 141St PI SE			Date of Receipt	
City	State	Zip Code	Transaction ID: 33037211	
Mill Creek	WA	98012-1336	Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.	C		210.00	
Name of Employer Radia, Inc.		ic Radiologist		
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 210.00		
Full Name (Last, First, Middle Initial) Dr. Ben Harmon	'		Date of Receipt	
Mailing Address Radia Medical Imag 728 134th St SW S			01 13 2010	
City	State	Zip Code	Transaction ID: 33037212	
Everett	WA	98204-5322	Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.	C		318.15	
Name of Employer Radia, Inc.		ic Radiologist		
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 318.15		
SUBTOTAL of Receipts This Page (optional	al)		878.15	

SCHEDULE A (FEC Form 3X)

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 12 / 70 (check only one) X
A c	Any information copied from such Reports and Sor for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American College of Radiology Assoc	e name and ad	dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	Full Name (Last, First, Middle Initial) Dr. Robert Hawkins			Date of Receipt
٦.	Mailing Address 7856 Scatchet Head F	Rd		0 1 1 3 2 0 1 0
	City	State	Zip Code	Transaction ID: 33037214
	Clinton	WA	98236-9768	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		350.00
	Name of Employer Radia, Inc.	Occupatio Diagnost	n ic Radiologist	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 350.00	
 3.	Full Name (Last, First, Middle Initial) Dr. David Marlow	1		Date of Receipt
	Mailing Address 7821 115th PI NE			0 1 1 3 2 0 1 0
	City	State	Zip Code	Transaction ID: 33037215
	Kirkland	WA	98033-6710	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		280.00
	Name of Employer Radia, Inc.	Occupatio Diagnost	n ic Radiologist	
	Receipt For: Primary General Other (specify) ♥	Aggregate	e Year-to-Date ▼ 280.00	
. —	Full Name (Last, First, Middle Initial) Dr. Mark Mayhle			Date of Receipt
	Mailing Address 907 14th Ave E			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: 33037216
	Seattle	WA	98112-3903	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		280.00
	Name of Employer Radia, Inc.	Occupatio Diagnost	n ic Radiologist	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 280.00	
	SUBTOTAL of Receipts This Page (optional)			910.00

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 13 / 70 (check only one) X
or for commercial purposes, other than using NAME OF COMMITTEE (In Full)	and Statements may not be sold or used by any persor ng the name and address of any political committee to sessociation Political Action Committee	of r the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial)	SSOCIATION FORTICAL ACTION COMMITTEE	T
Dr. Scott Vanderheiden Mailing Address 10501 NE 114th I	_n	Date of Receipt
City	State Zip Code	01 13 2010
Kirkland	WA 98033-4426	Transaction ID: 33037218 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	350.00
Name of Employer Radia, Inc.	Occupation Diagnostic Radiologist]
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial) Dr. Mohammed Quraishi	I	Date of Receipt
Mailing Address 721 N 82nd St		0 1 1 3 2 0 1 0
City	State Zip Code	Transaction ID: 33037219
<u>Seattle</u>	WA 98103-4319	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	350.00
Name of Employer Radia, Inc.	Occupation Diagnostic Radiologist]
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial) Dr. Joshua Abramowitz		Date of Receipt
Mailing Address 72 Saint Stephen:	s School Rd	0 1 1 3 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 33037220
Austin	TX 78746-2524	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer Austin Radiological Assoc- iates	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
SUBTOTAL of Receipts This Page (optio	nal)	1700.00

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 14 / 70 (check only one) X 11a 11b 11c 12 13 14 15 16
or for commercial purposes, other than using NAME OF COMMITTEE (In Full)	and Statements may not be sold or used by any person gethe name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
American College of Radiology As	ssociation Political Action Committee	
Full Name (Last, First, Middle Initial) Dr. Stephen Agatston		Date of Receipt
Mailing Address 2201 Far Gallant	Dr	01 13 2010
City	State Zip Code	Transaction ID: 33037221
Austin	TX 78746-1814	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer Austin Radiological Assoc-	Occupation Diagnostic Radiologist	
iates Receipt For: Primary General	Aggregate Year-to-Date ▼	
Other (specify)	1000.00	
Full Name (Last, First, Middle Initial) Dr. Michael Aronoff		Date of Receipt
Mailing Address 9609 Tobrina Ln		M M / D D / Y Y Y Y Y O D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 33037222
Austin	TX 78759-7708	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer Austin Radiological Assoc- iates	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial) Dr. Mark Auler		Date of Receipt
Mailing Address 1612 Watchhill Ro	d	M M / D D / Y Y Y Y Y O D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 33037223
<u>Austin</u>	TX 78703-2441	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer Austin Radiological Assoc- iates	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
SUBTOTAL of Receipts This Page (option	nal)	3000.00

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 15 / 70 (check only one) X 11a 11b 11c 12 13 14 15 16 1
Any information copied from such Reports a or for commercial purposes, other than usin NAME OF COMMITTEE (In Full)	and Statements may not be sold or used by any persoring the name and address of any political committee to s	n for the purpose of soliciting contributions solicit contributions from such committee.
American College of Radiology As	ssociation Political Action Committee	
Full Name (Last, First, Middle Initial) Dr. Sarah Avery		Date of Receipt
Mailing Address 120 Birnam Wood	I Ct	01 13 2010
City	State Zip Code	Transaction ID: 33037224
Austin	TX 78746-4500	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer Austin Radiological Assoc-	Occupation Diagnostic Radiologist	
iation Receipt For:	Aggregate Year-to-Date ▼	_
Primary General Other (specify) ▼	1000.00	
Full Name (Last, First, Middle Initial) Dr. William Banks		Date of Receipt
Mailing Address 10909 Range View	v Dr	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 33037225
Austin	TX 78730-3569	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer Austin Radiological Assoc- iates	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial) Dr. Lori Barr		Date of Receipt
Mailing Address Austin Radiologica 10900 Stonelake E		0 1 1 3 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 33037226
Austin	TX 78759-5873	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer Austin Radiological Assoc	Occupation Diagnostic Radiologist	1
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
SUBTOTAL of Receipts This Page (option	nal)	3000.00

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 16 / 70 (check only one) X 11a
Any information copied from such Reports and St or for commercial purposes, other than using the	tatements may	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American College of Radiology Association	ation Politic	al Action Committee	
Full Name (Last, First, Middle Initial) Dr. Hillel Ben-Avi			Date of Receipt
Mailing Address 4501 Spanish Oak Trl			M M / D D / Y Y Y Y Y O D D / 2010
City	State	Zip Code	Transaction ID: 33037227
Austin	TX	78731-5217	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		1000.00
Name of Employer Austin Radiological Assoc-	Occupation	n	
Austin Radiological Assoc- iates	Diagnost	ic Radiologist	
Receipt For:	Aggregate	e Year-to-Date ▼	
Primary General Other (specify) ▼	0 0	1000.00	
Full Name (Last, First, Middle Initial) Dr. Marouane Bouchareb			Date of Receipt
Mailing Address 10900 Stonelake Blvd	Ste 250		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 33037228
Austin	TX	78759-5873	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		1000.00
Name of Employer Austin Radiological Assoc- iates	Occupation Diagnost	n ic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1000.00]
Full Name (Last, First, Middle Initial) Dr. Bradley Brenner			Date of Receipt
Mailing Address Austin Radiological Ass 10900 Stonelake Blvd S			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 33037229
Austin	TX	78759-5873	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		1000.00
Name of Employer Austin Radiological Assoc- iates	Occupation Diagnost	n ic Radiologist	
Receipt For:	Aggregate	e Year-to-Date ▼	
Primary General Other (specify) ▼	0 0	1000.00	
SUBTOTAL of Receipts This Page (optional)			3000.00

SCHEDULE A (FEC Form 3X TEMIZED RECEIPTS	()	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 17 / 70 (check only one) X 11a 11b 11c 12
Any information copied from such Reports and or for commercial purposes, other than using	d Statements may r		13 14 15 16 on for the purpose of soliciting contributions
or for commercial purposes, other than using to NAME OF COMMITTEE (In Full)	the name and addre	ess of any political committee to	o solicit contributions from such committee.
American College of Radiology Asse	ociation Political	Action Committee	
Full Name (Last, First, Middle Initial) Dr. Lauren Brown			Date of Receipt
Mailing Address Austin Radiological PO Box 4099	Associates		01 13 7 2010
City	State	Zip Code	Transaction ID: 33037230
Austin	TX	78765-4099	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		1000.00
Name of Employer Austin Radiological Assoc-	Occupation	Padiologiat	
iates Receipt For:		Radiologist	\dashv
Primary General	Aggregate Y	'ear-to-Date ▼	-
Other (specify)		1000.00	1
Full Name (Last, First, Middle Initial) Dr. Chris Butschek			Date of Receipt
Mailing Address Austin Radiological PO Box 4099	Assoc		01 13 7 2010
City	State	Zip Code	Transaction ID: 33037231
Austin	TX	78765-4099	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		1000.00
Name of Employer Austin Radiological Assoc- iates	Occupation Diagnostic	Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Y	'ear-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial) Dr. Frank Chia			Date of Receipt
Mailing Address Austin Radiological 10900 Stonelake Blv			0 1 1 3 2 0 1 0
City	State	Zip Code	Transaction ID: 33037232
Austin	TX	78759-5873	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		1000.00
Name of Employer Austin Radiological Assoc- iates	Occupation Diagnostic	Radiologist	
Receipt For:		ear-to-Date ▼	
Primary General Other (specify) ▼	. 55. 554.0	1000.00]
SUBTOTAL of Receipts This Page (optional))		3000.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 18 / 70 (check only one) X 11a 11b 11c 12
	nd Statements may not be sold or used by any perso the name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American College of Radiology As:	sociation Political Action Committee	
Full Name (Last, First, Middle Initial) Dr. Gregory Connor		Date of Receipt
Mailing Address 2909 Cherry Ln	Chair 7:- Cada	01 13 2010
City Austin	State Zip Code TX 78703-2821	Transaction ID: 33037233
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 1000.00
Name of Employer Austin Radiological Associates	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial) Dr. Lawrence K. Conrad	I	Date of Receipt
Mailing Address Austin Radiologica 10900 Stonelake B	lvd Ste 250	01 13 2010
City	State Zip Code	Transaction ID: 33037234
Austin FEC ID number of contributing federal political committee.	TX 78759-5873	Amount of Each Receipt this Period 1000.00
Name of Employer Austin Radiological Associates	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00]
Full Name (Last, First, Middle Initial) Dr. Newell Dutton	1	Date of Receipt
Mailing Address 3400 Stratford Hills	s Lane	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Austin	State Zip Code TX 78746-4687	Transaction ID: 33037235 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer Austin Radiological Associates	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
SUBTOTAL of Receipts This Page (option)		3000.00

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 19 / 70 (check only one) X 11a 11b 11c 12 13 14 15 16 1
or for commercial purposes, other than using NAME OF COMMITTEE (In Full)	and Statements may not be sold or used by any person the name and address of any political committee to association Political Action Committee	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial)	ossialion i Gillion Action Committee	Data of Bassist
Dr. Nabeel Farhataziz Mailing Address 9908 Cinnabar Tr	I	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 33037236
Austin	TX 78726-2425	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer Austin Radiological Associates Receipt For: ☐ Primary ☐ General Other (specify) ▼	Occupation Diagnostic Radiologist Aggregate Year-to-Date 1000.00	
Full Name (Last, First, Middle Initial) Dr. David Feldman		Date of Receipt
Mailing Address Austin Radiologica 10900 Stonelake I	al Assoc	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 33037237
Austin	TX 78759-5873	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer Austin Radiological Association Receipt For: Primary General Other (specify) ▼	Occupation Diagnostic Radiologist Aggregate Year-to-Date 1000.00	
Full Name (Last, First, Middle Initial) Dr. Thomas Fletcher		Date of Receipt
Mailing Address 2206 E Windsor F	Rd	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 33037238
Austin	TX 78703-3119	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer Austin Radiological Assoc- iation	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
SUBTOTAL of Receipts This Page (option	nal)	3000.00

SCHEDULE A (FEC Form 3X TEMIZED RECEIPTS	for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 20 / 70 (check only one) X 11a
Any information copied from such Reports and or for commercial purposes, other than using to NAME OF COMMITTEE (In Full) American College of Radiology Asso	d Statements may not be sold or used by any personal he name and address of any political committee to occiation Political Action Committee	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial)		
Dr. Patricia Gallagher Mailing Address 5005 Strass Dr		Date of Receipt
City	State Zip Code	0 1 1 3 2 0 1 0 Transaction ID: 33037251
Austin	TX 78731-5629	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer Austin Radiological Assoc-	Occupation Diagnostic Radiologist	
<u>iates</u> Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	1000.00	
Full Name (Last, First, Middle Initial) Dr. David Goldblatt		Date of Receipt
Mailing Address PO Box 4099		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 33037252
Austin	TX 78765-4099	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer Austin Radiological Assoc- iates	Occupation Radiologist	
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial) Dr. Mark Gray		Date of Receipt
Mailing Address 3007 Stratford Dr		M M / D D / Y Y Y Y Y O D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 33037253
Austin	TX 78746-4650	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer Austin Radiological Assoc- iation	Occupation Radiologist	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	1000.00	
		3000.00

SCHEDULE A (FEC Form 3X TEMIZED RECEIPTS	(1)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 21 / 70 (check only one) X 11a 11b 11c 12
Any information copied from such Reports and or for commercial purposes, other than using the second	d Statements may the name and add	not be sold or used by any pers ress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American College of Radiology Asso	ociation Politica	Il Action Committee	
Full Name (Last, First, Middle Initial) Dr. Michael Gunlock			Date of Receipt
Mailing Address 2604 Shire Ridge Dr	r		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 33037254
Austin	TX	78732-2064	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		1000.00
Name of Employer Austin Radiological Assoc-	Occupation		7
<u>iation</u>	- 	c Radiologist	
Receipt For:	Aggregate	Year-to-Date ▼	
Primary General Other (specify) ▼	0 0	1000.00	
Full Name (Last, First, Middle Initial) Dr. Larry Hill	•		Date of Receipt
Mailing Address Austin Radiological PO Box 4099	Assoc		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 33037255
Austin	TX	78765-4099	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		1000.00
Name of Employer Austin Radiological Assoc- iates	Occupation Radiologis		
Receipt For: Primary General Other (specify)	Aggregate 1	Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial) Dr. Ronald Hoelscher			Date of Receipt
Mailing Address 4601 Elohi Dr			0 1
City	State	Zip Code	Transaction ID: 33037257
Austin	TX	78746-1642	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		1000.00
Name of Employer Austin Radiological Assoc.	Occupation Diagnostic	c Radiologist	
Receipt For:	Aggregate 1	Year-to-Date ▼	
Primary General Other (specify) ▼	0 0	1000.00	
SUBTOTAL of Receipts This Page (optional			3000.00

SCHEDULE A (FEC Form 3XITEMIZED RECEIPTS	for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 22 / 70 (check only one) X 11a
or for commercial purposes, other than using NAME OF COMMITTEE (In Full)	nd Statements may not be sold or used by any perso the name and address of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
American College of Radiology Ass	sociation Political Action Committee	
Full Name (Last, First, Middle Initial) Dr. John Hogg		Date of Receipt
Mailing Address 1404 Wild Cat Holv	V	0 1 1 3 2 0 1 0
City	State Zip Code	Transaction ID: 33037258
Austin	TX 78746-3622	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer Austin Radiological Assoc- iates	Occupation Radiologist	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	1000.00	
Full Name (Last, First, Middle Initial) Dr. Jody Hooten		Date of Receipt
Mailing Address 2716 Regents Park		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 33037259
Austin	TX 78746-6843	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer Austin Radiological Assoc- iates	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial) Dr. Connie Hsu		Date of Receipt
Mailing Address Austin Radiological 10900 Stonelake Bl	vd Ste 250	0 1 1 3 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 33037260
Austin	TX 78759-5873	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer Austin Radiological Assoc- iation	Occupation Diagnostic Radiologist	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	1000.00	
		3000.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 23 / 70 (check only one) X 11a 11b 11c 12 13 14 15 16 11
or for commercial purposes, other than using NAME OF COMMITTEE (In Full)	nd Statements may not be sold or used by any persong the name and address of any political committee to sociation Political Action Committee	on for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Dr. Shaheen Hussaini Mailing Address 1702 Pease Rd		Date of Receipt
City	State Zip Code	0 1 1 3 2 0 1 0 Transaction ID: 33037261
Austin FEC ID number of contributing federal political committee.	TX 78703-3403	Amount of Each Receipt this Period 1000.00
Name of Employer Austin Radiological Associates Receipt For: ☐ Primary ☐ General Other (specify) ▼	Occupation Diagnostic Radiologist Aggregate Year-to-Date 1000.00	
Full Name (Last, First, Middle Initial) Dr. Kent Ibanez Mailing Address 10900 Stoneland E	Blvd Ste 250	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Austin FEC ID number of contributing federal political committee.	State Zip Code TX 78759-5873 C	Transaction ID: 33037273 Amount of Each Receipt this Period 1000.00
Name of Employer Austin Radiological Associates Receipt For: □ Primary □ General Other (specify) ▼	Occupation Diagnostic Radiologist Aggregate Year-to-Date 1000.00	
Full Name (Last, First, Middle Initial) Dr. Michael Jaimes Mailing Address 2321 Sheridan St		Date of Receipt
City Houston	State Zip Code TX 77030-2017	Transaction ID: 33037274 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer Austin Radiological Assoc- iates	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
SUBTOTAL of Receipts This Page (options	al)	3000.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s for each category of the Detailed Summary Page	(check dilly dile)
Any information copied from such Reports and or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American College of Radiology Asset		person for the purpose of soliciting contributions tee to solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Dr. Ravi Jhaveri Mailing Address Austin Radiological 10900 Stonelake Blv City Austin FEC ID number of contributing federal political committee. Name of Employer Austin Radiological Associates Receipt For:	Assoc	Date of Receipt M M M / D D J 2010 Transaction ID: 33037275 Amount of Each Receipt this Period 1000.00
Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Dr. Charles E. Johnson Mailing Address 13337 Brightsky Ov	erlook	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Austin FEC ID number of contributing federal political committee. Name of Employer Austin Radiological Associates Receipt For: Primary General Other (specify)	State Zip Code TX 78732-2393 C Occupation Diagnostic Radiologist Aggregate Year-to-Date ▼ 1000.00	Transaction ID: 33037276 Amount of Each Receipt this Period 1000.00
Full Name (Last, First, Middle Initial) Dr. Gregory Karnaze Mailing Address Austin Radiological 10900 Stonelake Blv City Austin FEC ID number of contributing federal political committee. Name of Employer Austin Radiological Associates Receipt For: Primary General Other (specify)		Date of Receipt M M M / D D D / Y Y Y Y Y O 1 1 3 33037277 Amount of Each Receipt this Period 1000.00
SUBTOTAL of Receipts This Page (optional)	3000.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 25 / 70 (check only one) X 11a 11b 11c 12 13 14 15 16
or for commercial purposes, other than using NAME OF COMMITTEE (In Full)	d Statements may not be sold or used by any personante name and address of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
American College of Radiology Ass	ociation Political Action Committee	
Full Name (Last, First, Middle Initial) Dr. John Kish		Date of Receipt
Mailing Address 3608 Travis Country	y Circle	0 1 1 3 2 0 1 0
City	State Zip Code	Transaction ID: 33037282
Austin	TX 78735-6106	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer Austin Radiological Assoc-	Occupation	7
iation Receipt For:	Diagnostic Radiologist	_
Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial) Dr. Brandon Langlinais		Date of Receipt
Mailing Address 707 North Tumblew	eed Trail	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 33037283
Austin	TX 78733-3240	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer Austin Radiological Assoc- iates	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00]
Full Name (Last, First, Middle Initial) Dr. Jeffrey Lava		Date of Receipt
Mailing Address 4701 Ridge Oak Dr		01 13 2010
City	State Zip Code	Transaction ID: 33037284
Austin	TX 78731-4723	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer Austin Radiological Assoc- iates	Occupation Diagnostic Radiologist	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	1000.00	
SUBTOTAL of Receipts This Page (optiona		3000.00

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 26 / 70 (check only one) X 11a 11b 11c 12 13 14 15 16 1
Any information copied from such Reports or for commercial purposes, other than usin NAME OF COMMITTEE (In Full)	and Statements may not be sold or used by any persong the name and address of any political committee to	son for the purpose of soliciting contributions to solicit contributions from such committee.
	ssociation Political Action Committee	
Full Name (Last, First, Middle Initial) Dr. John Leahy		Date of Receipt
Mailing Address Austin Radiologic 10900 Stonelake I		0 1 1 3 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 33037285
Austin	TX 78759-5826	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer Austin Radiological Assoc-	Occupation Diagnostic Radiologist	
<u>iation</u> Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	1000.00	
Full Name (Last, First, Middle Initial) Dr. David Leake	L	Date of Receipt
Mailing Address 6114 Mountainclin	mb Dr	0 1 1 3 2 0 1 0
City	State Zip Code	Transaction ID: 33037286
Austin	TX 78731-3824	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer Austin Radiological Assoc- iates	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial) Dr. Marcus Lines	I	Date of Receipt
Mailing Address 7 Ehrlich Road		0 1 1 3 2 0 1 0
City	State Zip Code	Transaction ID: 33037289
Austin	TX 78746-3110	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer Austin Radiological Assoc- iation	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
SUBTOTAL of Receipts This Page (option	nal)	3000.00

	HEDULE A (FEC Form 3X) MIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 27/70 (check only one)
Any or fo	information copied from such Reports and or commercial purposes, other than using the	Statements may	y not be sold or used by any perso	on for the purpose of soliciting contributions
\leftarrow	NAME OF COMMITTEE (In Full)			
\	American College of Radiology Assoc	ciation Politic	al Action Committee	
	Full Name (Last, First, Middle Initial) Dr. Gael Joan Lonergan			Date of Receipt
_	Mailing Address Austin Radiological A 10900 Stonelake Blvd			0 1 1 3 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: 33037290
4	Austin	TX	78759-5873	Amount of Each Receipt this Period
	FEC ID number of contributing ederal political committee.	C		1000.00
- 1 1	Name of Employer Austin Radiological Assoc- ation	Occupatio Diagnost	n ic Radiologist	
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1000.00	
	Full Name (Last, First, Middle Initial) Dr. John Manning			Date of Receipt
N	Mailing Address Austin Radiological A 10900 Stonelake Blvd			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
(Dity	State	Zip Code	Transaction ID: 33037291
1	Austin	TX	78759-5826	Amount of Each Receipt this Period
	EC ID number of contributing ederal political committee.	C		1000.00
l i	Name of Employer Austin Radiological Assoc- ation	Occupatio Diagnost	n ic Radiologist	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		1000.00	
	Full Name (Last, First, Middle Initial) Dr. Michael Martin			Date of Receipt
N	Mailing Address 4201 Green Cliffs Rd			M M / D D / Y Y Y Y Y O D D / 2010
(Dity	State	Zip Code	Transaction ID: 33037292
1	Austin	TX	78746-1242	Amount of Each Receipt this Period
	FEC ID number of contributing ederal political committee.	C		1000.00
	Name of Employer Austin Radiological Assoc- ates	Occupatio Diagnost	n ic Radiologist	
	Receipt For:		e Year-to-Date ▼	
	Primary General Other (specify) ▼		1000.00	

SCHEDULE A (FEC Form ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 28 / 70 (check only one) X 11a 11b 11c 12 13 14 15 16 11
or for commercial purposes, other than use NAME OF COMMITTEE (In Full)	ts and Statements may not be sold or used by any person sing the name and address of any political committee to Association Political Action Committee	on for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Dr. Anthony Masaryk		Date of Receipt
Mailing Address Austin Radiolog PO Box 4099	ical Assoc	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 33037293
Austin FEC ID number of contributing federal political committee.	TX 78765-4099	Amount of Each Receipt this Period 1000.00
Name of Employer Austin Radiological Assoc- iation Receipt For:	Occupation Radiologist	
Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial) Dr. Curtis McClurg		Date of Receipt
Mailing Address 2607 Stratford D	Or	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 33037535
Austin	TX 78746-4622	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer Austin Radiological Assoc- iates	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial) Dr. Mark McLelland		Date of Receipt
Mailing Address PO Box 4099		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Austin	State Zip Code TX 78765-4099	Transaction ID: 33037536 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer Austin Radiological Assoc- iation	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
SUBTOTAL of Receipts This Page (opt	tional)	3000.00

SCHEDULE A (FEC Form SITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 29 / 70 (check only one) X
Any information copied from such Reports or for commercial purposes, other than us NAME OF COMMITTEE (In Full)	and Statements may not be sold or used by any personing the name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
American College of Radiology A	Association Political Action Committee	
Full Name (Last, First, Middle Initial) Dr. lan McLoughlin		Date of Receipt
Mailing Address 3120 Wild Canyo	on Loop	01 13 7 2010
City	State Zip Code	Transaction ID: 33037537
Austin	TX 78732-1948	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer Austin Radiological Assoc-	Occupation Diagnostic Radiologist	
Receipt For: Primary General	Aggregate Year-to-Date ▼ 1000.00	
Other (specify) ▼	0 0 0 0 0 0 0 0	
Full Name (Last, First, Middle Initial) Dr. M Mercado-Deane	<u> </u>	Date of Receipt
Mailing Address Austin Radiologic 10900 Stonelake		01 13 2010
City	State Zip Code	Transaction ID: 33037538
Austin	TX 78759-5873	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer Austin Radiological Assoc- iates	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial) Dr. Gunar G. Mezaraups		Date of Receipt
Mailing Address Austin Radiologic PO Box 4099	cal Assoc	01 13 2010
City Austin	State Zip Code TX 78765-4099	Transaction ID: 33037539 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer Austin Radiological Assoc- iation	Occupation Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
SUBTOTAL of Receipts This Page (option	onal)	3000.00

SCHEDULE A (FEC Form 3X)

SCHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 30 / 70 (check only one) X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may ne name and add	y not be sold or used by any persondress of any political committee to	
American College of Radiology Associ	ciation Politic	al Action Committee	
Full Name (Last, First, Middle Initial) Dr. Andrea Michel			Date of Receipt
Mailing Address Austin Radiological A 10900 Stonelake Blvo			01 13 2010
City	State	Zip Code	Transaction ID: 33037540
Austin	TX	78759-5873	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		1000.00
Name of Employer Austin Radiological Assoc- iation	Occupation Radiolog		
Receipt For:	Aggregate	e Year-to-Date ▼	
Primary General Other (specify) ▼	0 0	1000.00	
Full Name (Last, First, Middle Initial) Dr. Robert Milman			Date of Receipt
Mailing Address 6409 Williams Ridge	Way		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 33037541
Austin	TX	78731-2709	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		1000.00
Name of Employer Austin Radiological Assoc.	Occupation Diagnost	n iic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1000.00]
Full Name (Last, First, Middle Initial) Dr. Elizabeth Moorehead	1		Date of Receipt
Mailing Address 8206 Sandalwood Co	ove		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 33037542
Austin	TX	78757-7522	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		1000.00
Name of Employer Austin Radiological Assoc- iates		ic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1000.00	
			3000.00

Any inform	OULE A (FEC Form 3X) ZED RECEIPTS nation copied from such Reports and Sta	atements ma	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 31 / 70 (check only one) X
or for com	mercial purposes, other than using the r OF COMMITTEE (In Full) can College of Radiology Associa	ame and add	dress of any political committee to	solicit contributions from such committee.
	me (Last, First, Middle Initial) on Naples			Date of Receipt
Mailing	Address Austin Radiological Ass PO Box 4700	ociation		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City		State	Zip Code	Transaction ID: 33037543
	n D number of contributing political committee.	C	78765-4700	Amount of Each Receipt this Period 1000.00
iation Receip	of Employer Radiological Assoc- t For: Primary General Other (specify) ▼		n cic Radiology e Year-to-Date ▼ 1000.00	
B. Dr. Dav	me (Last, First, Middle Initial) rid Nichols Address 4507 River Wood Court			Date of Receipt
City		State	Zip Code	0 1 1 3 2 0 1 0 Transaction ID: 33037544
	number of contributing political committee.	C	78731-4518	Amount of Each Receipt this Period 1000.00
Austin <u>iates</u>	of Employer Radiological Assoc-		ic Radiologist	
	rt For: Primary General Other (specify) ♥	Aggregate	e Year-to-Date ▼ 1000.00	
	ıme (Last, First, Middle Initial) ora Pennington			Date of Receipt
Mailing	Address 2721 Bartons Bluff Ln			M M / D D / Y Y Y Y Y O D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Austin	1	State TX	Zip Code 78746-7988	Transaction ID: 33037545 Amount of Each Receipt this Period
	number of contributing political committee.	C		1000.00
Austin <u>iation</u>	of Employer Radiological Assoc-		ic Radiologist	
	t For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1000.00	
SUBTOT	AL of Receipts This Page (optional)			3000.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 32 / 70 (check only one) X
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	tatements may name and add	y not be sold or used by any perso dress of any political committee to	
American College of Radiology Associ	iation Politic	al Action Committee	
Full Name (Last, First, Middle Initial) Dr. F Pfeifer, II			Date of Receipt
Mailing Address 8029 Muley Dr			0 1 1 3 2 0 1 0
City	State	Zip Code	Transaction ID: 33037546
Austin	TX	78759-6900	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		1000.00
Name of Employer Austin Radiological Assoc-	Occupatio		
iation	, ' 	tic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1000.00]
Full Name (Last, First, Middle Initial) Dr. Mark Poag	1		Date of Receipt
Mailing Address 15401 Bat Hawk Cir			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 33037547
Austin	TX	78738-6865	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		1000.00
Name of Employer Austin Radiological Assoc- iates	Occupatio Diagnost	n tic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial) Dr. Wilbert Polson			Date of Receipt
Mailing Address 2403 Camino Alto			01 13 2010
City	State	Zip Code	Transaction ID: 33037548
Austin	TX	78746-2406	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		1000.00
Name of Employer Austin Radiological Assoc- iation	Occupatio Diagnost	n tic Radiologist	
Receipt For:	Aggregate	e Year-to-Date ▼	
Primary General Other (specify) ▼		1000.00]
SUBTOTAL of Receipts This Page (optional)		_	3000.00

SCHEDULE A (FEC Form 3) TEMIZED RECEIPTS	()	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 33 / 70 (check only one) X 11a 11b 11c 12
Any information copied from such Reports an or for commercial purposes, other than using	d Statements may the name and addr	not be sold or used by any perso ess of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American College of Radiology Ass	ociation Politica	I Action Committee	
Full Name (Last, First, Middle Initial) Dr. Russell Putnam			Date of Receipt
Mailing Address 12243 Trautwein Ro	d		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 33037549
Austin	TX	78737-9365	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		1000.00
Name of Employer	Occupation		
Austin Radiological Assoc- iation	Diagnostic	Radiologist	
Receipt For:	Aggregate \	Year-to-Date ▼	
Primary General Other (specify) ▼	0 0	1000.00	
Full Name (Last, First, Middle Initial) Dr. Yvonne Queralt			Date of Receipt
Mailing Address Austin Radiological 10900 Stonelake Bl			01 13 7 2010
City	State	Zip Code	Transaction ID: 33037550
Austin	TX	78759-5826	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		1000.00
Name of Employer Austin Radiological Assoc- iation	Occupation Diagnostic	c Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate \	Year-to-Date ▼ 1000.00]
Full Name (Last, First, Middle Initial) Dr. Andrew Reifsnyder			Date of Receipt
Mailing Address Austin Radiological 10900 Stonelake Bl			01 13 7 2010
City	State	Zip Code	Transaction ID: 33037551
Austin	TX	78759-5826	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		1000.00
Name of Employer Austin Radiological Assoc	Occupation Diagnostic	: Radiologist	
Receipt For:	Aggregate \	Year-to-Date ▼	
Primary General Other (specify) ▼	0 0	1000.00	
SUBTOTAL of Receipts This Page (optiona			3000.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	()	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 34 / 70 (check only one) X
Any information copied from such Reports an or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American College of Radiology Ass	the name and add	dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Dr. Christopher Richards Mailing Address Austin Radiological	Assoc		Date of Receipt
PO Box 4099 City	State	Zip Code	0 1 1 3 2 0 1 0 Transaction ID: 33037552
Austin FEC ID number of contributing federal political committee.	C	78765-4099	Amount of Each Receipt this Period 1000.00
Name of Employer Austin Radiological Associates Receipt For: ☐ Primary ☐ General Other (specify) ▼	Occupation Radiolog Aggregate		
Full Name (Last, First, Middle Initial) Dr. Dan Richardson Mailing Address 8616 Mendocino Dr			Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 33037553
Austin	TX	78735-1423	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		1000.00
Name of Employer Austin Radiological Assoc- iation Receipt For:		ic Radiologist	
Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1000.00]
Full Name (Last, First, Middle Initial) Dr. William Rodriguez			Date of Receipt
Mailing Address 1036 Liberty Park D	Or Apt 53		01 13 7 2010
City	State	Zip Code	Transaction ID: 33037554
Austin	TX	78746-7025	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		1000.00
Name of Employer Austin Radiological Associates	1 '	ic Radiologists	
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1000.00	
SUBTOTAL of Receipts This Page (optiona			3000.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedul for each category of the Detailed Summary Pa	ne (crick only one)
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American College of Radiology Associations (In Full)	e name and address of any political com	ny person for the purpose of soliciting contributions mittee to solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Dr. John Rutledge Mailing Address Austin Radiological A PO Box 4099 City Austin FEC ID number of contributing federal political committee. Name of Employer Austin Radiological Assoc Receipt For:	State Zip Code TX 78765-4099 C Occupation Diagnostic Radiologist Aggregate Year-to-Date	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Primary General Other (specify) Full Name (Last, First, Middle Initial) Dr. Amy Salinas	Aggregate rear-to-bate v	Date of Receipt
Mailing Address 3310 Bridle Path City Austin FEC ID number of contributing federal political committee. Name of Employer Austin Radiological Associates Receipt For: □ Primary □ General □ Other (specify) ▼	State Zip Code TX 78703-2712 C Occupation Diagnostic Radiologist Aggregate Year-to-Date ▼ 10000.	Transaction ID: 33037556 Amount of Each Receipt this Period 1000.00
Full Name (Last, First, Middle Initial) Dr. Rodney Schmidt Mailing Address 1938 Holly Hill Dr Apt City Austin FEC ID number of contributing federal political committee. Name of Employer Austin Radiological Assoc Receipt For: Primary General Other (specify)	State Zip Code TX 78746-7653 C Occupation Diagnostic Radiologist Aggregate Year-to-Date	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (optional) .		3000.00

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 36 / 70 (check only one) X 11a 11b 11c 12 13 14 15 16 1
or for commercial purposes, other than usi NAME OF COMMITTEE (In Full)	and Statements may not be sold or used by any persong the name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
American College of Radiology A	Association Political Action Committee	
Full Name (Last, First, Middle Initial) Dr. Rajeev Shah		Date of Receipt
Mailing Address 1907 Lakeshore I	Dr	0 1 1 3 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 33037558
Austin	TX 78746-2904	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer Austin Radiological Assoc-	Occupation Diagnostic Radiologist	
<u>iates</u> Receipt For:	Aggregate Year-to-Date ▼	-
Primary General Other (specify) ▼	1000.00	
Full Name (Last, First, Middle Initial) Dr. Sandeep Shah	I	Date of Receipt
Mailing Address 7804 Texas Plum	ne Rd	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 33037559
Austin	TX 78759-6030	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer Austin Radiological Assoc- iates	Occupation Diagnostic Radiologist	
Receipt For: Primary General	Aggregate Year-to-Date ▼ 1000.00	
Other (specify) ▼	1000.00	
Full Name (Last, First, Middle Initial) Dr. David Shaw	,	Date of Receipt
Mailing Address 10900 Stonelake	Blvd Suite 250	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 33037560
Austin	TX 78759-5873	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer Austin Radiological Assoc- iates	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
SUBTOTAL of Receipts This Page (optic	onal)	3000.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 37 / 70 (check only one) X 11a 11b 11c 12 13 14 15 16 11		
or for commercial purposes, other than using the	Statements may not be sold or used by any persone name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.		
NAME OF COMMITTEE (In Full) American College of Radiology Asso	ciation Political Action Committee			
Full Name (Last, First, Middle Initial) Dr. Jeffrey Sheneman Mailing Address 10703 Winchelsea D	_	Date of Receipt		
City	State Zip Code	0 1 1 3 2 0 1 0 Transaction ID: 33037561		
Austin	TX 78750-4039	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C	1000.00		
Name of Employer Austin Radiological Assoc- iates	Occupation Diagnostic Radiologist			
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00			
Full Name (Last, First, Middle Initial) Dr. Christopher Swanson		Date of Receipt		
Mailing Address 1104 Blanco St				
City	State Zip Code	Transaction ID: 33037562		
Austin	TX 78703-4920	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C	1000.00		
Name of Employer Austin Radiological Assoc- iation	Occupation Diagnostic Radiologist			
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00			
Full Name (Last, First, Middle Initial) Dr. Gabrielle Theriault		Date of Receipt		
Mailing Address 402 Vale St		01 13 7 2010		
City	State Zip Code	Transaction ID: 33037563		
Rollingwood	TX 78746-5731	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C	1000.00		
Name of Employer Austin Radiological Assoc- iation	Occupation Diagnostic Radiologist			
Receipt For:	Aggregate Year-to-Date ▼			
Primary General Other (specify) ▼	1000.00			
SUBTOTAL of Receipts This Page (optional)		3000.00		
SUBTOTAL of Receipts This Page (optional) TOTAL This Period (last page this line number	·	3000.00		

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	X)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 38 / 70 (check only one) X
Any information copied from such Reports at or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American College of Radiology Ass	g the name and add	dress of any political committee to	on for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial) Dr. Eugene Tong Mailing Address 11405 Cedarcliffe I	Dr		Date of Receipt O 1
City Austin FEC ID number of contributing federal political committee.	State TX	Zip Code 78750-3612	Transaction ID: 33037564 Amount of Each Receipt this Period 1000.00
Name of Employer Austin Radiological Association Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼		n ic Radiologist Year-to-Date ▼	
Full Name (Last, First, Middle Initial) Dr. Anthony Trevino Mailing Address 6712D Valburn Dr			Date of Receipt O 1
City Austin FEC ID number of contributing federal political committee.	State TX	Zip Code 78731-1802	Transaction ID: 33037565 Amount of Each Receipt this Period 1000.00
Name of Employer Austin Radiological Association Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼		n ic Radiologist Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial) Dr. Simon Trubek Mailing Address 4705 Maple St	I		Date of Receipt
City Bellaire FEC ID number of contributing federal political committee.	State TX	Zip Code 77401-5726	Transaction ID: 33037566 Amount of Each Receipt this Period 1000.00
Name of Employer Austin Radiological Association Receipt For: Primary General Other (specify)		n ic Radiologist Year-to-Date ▼ 1000.00	
SUBTOTAL of Receipts This Page (optional	al)		3000.00

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 39 / 70 (check only one) X 11a
An or	y information copied from such Reports and S for commercial purposes, other than using the	Statements may e name and add	not be sold or used by any persolress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American College of Radiology Assoc	ciation Politica	al Action Committee	
	Full Name (Last, First, Middle Initial) Dr. Binh Truong			Date of Receipt
	Mailing Address Austin Radiological As PO Box 4099			01 13 2010
	City Austin	State TX	Zip Code 78765-4099	Transaction ID: 33037567 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	70703 4000	1000.00
	Name of Employer Austin Radiological Associates Receipt For: ☐ Primary ☐ General Other (specify) ▼	, ' 	ic Radiologist Year-to-Date 1000.00	
	Full Name (Last, First, Middle Initial) Dr. John Williams Mailing Address 2902 Clearview Dr			Date of Receipt
		01 13 2010		
	City Austin	State TX	Zip Code	Transaction ID: 33037568
	FEC ID number of contributing federal political committee.	C	78703-2847	Amount of Each Receipt this Period 1000.00
	Name of Employer Austin Radiological Assoc- iates	Occupation Diagnost	n ic Radiologist	
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1000.00	
	Full Name (Last, First, Middle Initial) Dr. J. Andrew Williamson			Date of Receipt
	Mailing Address P.O. Box 4700			0 1 1 3 2 0 1 0
	City	State	Zip Code	Transaction ID: 33037569
	Austin	TX	78765-4700	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		1000.00
	Name of Employer Austin Radiological Associates	Occupation Diagnost	n ic Radiologist	
	Receipt For:	, ' 	Year-to-Date ▼	
	Primary General Other (specify) ▼		1000.00	
	JBTOTAL of Receipts This Page (optional)			3000.00

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 40 / 70 (check only one) X
or for commercial purposes, other than usin NAME OF COMMITTEE (In Full)	and Statements may not be sold or used by any persong the name and address of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Dr. James P. Willis Mailing Address 4942 Yarwell Dr. City Houston FEC ID number of contributing federal political committee. Name of Employer Austin Radiological Associates	State Zip Code TX 77096-4231 C Occupation Diagnostic Radiologist	Date of Receipt M M M / D D / Y Y Y Y Y O 1 3 2 0 1 0 Transaction ID: 33037597 Amount of Each Receipt this Period 1000.00
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial) Dr. Mary Winsett Mailing Address 3405 Northwood (City	Cir State Zip Code	Date of Receipt M
Austin FEC ID number of contributing federal political committee.	TX 78703-1004	Amount of Each Receipt this Period
Name of Employer Austin Radiological Association Receipt For: Primary General Other (specify) ▼	Occupation Diagnostic Radiologist Aggregate Year-to-Date 1000.00	
Full Name (Last, First, Middle Initial) Dr. Charles Wiseman Mailing Address Austin Radiologic	al Assoc	Date of Receipt
10900 Stonelake l City Austin	Blvd Ste 250 Zip Code TX 78759-5873	Transaction ID: 33037599 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer Austin Radiological Assoc- iates Receipt For:	Occupation Diagnostic Radiologist Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	1000.00	
SUBTOTAL of Receipts This Page (option	nal)	3000.00

ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 41 / 70 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and or for commercial purposes, other than using to NAME OF COMMITTEE (In Full) American College of Radiology Associations	I Statements may not be sold or used by any person the name and address of any political committee to ociation Political Action Committee	on for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Dr. Victor Gaines Mailing Address DRA Imaging PC FI 1 Columbia St City Poughkeepsie FEC ID number of contributing federal political committee.	State Zip Code NY 12601-3923	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Employer DRA Imaging, P.C. Receipt For: Primary General Other (specify) ▼	Occupation Diagnostic Radiologist Aggregate Year-to-Date 500.00	
Full Name (Last, First, Middle Initial) Dr. Jack Hentel Mailing Address 122 Ridgeview Rd City	State Zip Code	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y
Poughkeepsie FEC ID number of contributing federal political committee.	NY 12603-4264 C Occupation	Amount of Each Receipt this Period 250.00
Name of Employer DRA Imaging, P.C. Receipt For: Primary General Other (specify) ▼	Diagnostic Radiologist Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Dr. Russell Karp Mailing Address 23 Croft Rd	1	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Poughkeepsie FEC ID number of contributing	State Zip Code NY 12603-4917	Transaction ID: 33037661 Amount of Each Receipt this Period 500.00
federal political committee. Name of Employer DRA Imaging, P.C.	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
SUBTOTAL of Receipts This Page (optional)	>	1250.00

Mailing Address Vassar Brothers Hospital 31 Reade PI City State Zip Code Poughkeepsie NY 12601-3990 FEC ID number of contributing federal political committee. Name of Employer DRA Imaging, P.C. Full Name (Last, First, Middle Initial) Dr. Philip Amatulle Mailing Address 14 Angela Ct City State Zip Code Hopewell Jct NY 12533-6144 FEC ID number of contributing federal political committee. C Date of Receipt Date of Receipt Transaction ID: 33037663 Amount of Each Receipt this Period Date of Receipt Transaction ID: 33037664 Amount of Each Receipt this Period Date of Receipt Transaction ID: 33037664 Amount of Each Receipt this Period Date of Receipt Transaction ID: 33037664 Amount of Each Receipt this Period Transaction ID: 33037664 Amount of Each Receipt this Period Transaction ID: 30037664 Amount of Each Receipt this Period Transaction ID: 30037664 Amount of Each Receipt this Period Transaction ID: 30037664 Amount of Each Receipt This Period Transaction ID: 30037664 Amount of Each Receipt This Period Transaction ID: 30037664 Amount of Each Receipt This Period Transaction ID: 30037664 Amount of Each Receipt This Period Transaction ID: 30037664 Amount of Each Receipt This Period Transaction ID: 30037664 Amount of Each Receipt This Period Transaction ID: 30037664 Amount of Each Receipt This Period Transaction ID: 30037664 Amount of Each Receipt This Period Transaction ID: 30037664 Amount of Each Receipt This Period Transaction ID: 30037664 Amount of Each Receipt This Period Transaction ID: 30037664 Amount of Each Receipt This Period Transaction ID: 30037664 Amount of Each Receipt This Period Transaction ID: 30037664 Amount of Each Receipt This Period Transaction ID: 30037664 Amount of Each Receipt This Period	ľ	CHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Statomonto mo	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 42 / 70 (check only one) X
A. Dr. Richard Friedland Mailing Address 57 Kingwood Dr City State Zip Code Poughkeepsie NY 12601-5404 FEC ID number of contributing federal political committee. Name of Employer General Other (specify) ▼ Full Name (Last, First, Middle Initial) Dr. W Zev Coldstein Mailing Address Vassar Brothers Hospital 31 Reade Pl City State Zip Code Poughkeepsie NY 12601-3990 FEC ID number of contributing federal political committee. Name of Employer Poughkeepsie NY 12601-3990 FEC ID number of contributing federal political committee. Name of Employer Poughkeepsie NY 12601-3990 FEC ID number of contributing federal political committee. Name of Employer Occupation Diagnostic Radiologist Aggregate Year-to-Date ▼ Pirmary General Other (specify) ▼ Date of Receipt NY 12601-3990 Amount of Each Receipt this Period City State Zip Code Diagnostic Radiologist Aggregate Year-to-Date ▼ Pirmary General Other (specify) ▼ Date of Receipt Transaction ID: 33037663 Amount of Each Receipt this Period City State Zip Code Diagnostic Radiologist Aggregate Year-to-Date ▼ Pirmary General Other (specify) ▼ Date of Receipt Transaction ID: 33037664 Amount of Each Receipt this Period FEC ID number of contributing federal political committee. City State Zip Code Diagnostic Radiologist Aggregate Year-to-Date ▼ Pirmary General Other (specify) ▼ Occupation Diagnostic Radiologist Aggregate Year-to-Date ▼ Pirmary General Other (specify) ▼ Occupation Diagnostic Radiologist Aggregate Year-to-Date ▼ Pirmary General Other (specify) ▼ Occupation Diagnostic Radiologist Aggregate Year-to-Date ▼ Pirmary General Other (specify) ▼		or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	e name and ad	ldress of any political committee t	o solicit contributions from such committee.
Name of Employer DRA Imaging, P.C. Receipt For: Primary General Other (specify) ▼ Date of Receipt NY 12501-3990 C. Primary General Other (specify) ▼ Date of Receipt Date of Receipt NY 12501-3990 Date of Receipt Date of Receipt NY 12501-3990 Date of Receipt NY 12503-614 Amount of Each Receipt this Period Transaction ID: 33037664 Amount of Each Receipt this Period Date of Receipt NY 12503-36144 Date of Receipt NY 12503-614 Date of Receipt NY 12503-614 Amount of Each Receipt this Period Transaction ID: 33037664 Amount of Each Receipt this Period Date of Receipt NY 12503-614 Amount of Each Receipt this Period Transaction ID: 33037664 Amount of Each Receipt this Period Sould Amount of Each Receipt this Period Transaction ID: 33037664 Amount of Each Receipt this Period Sould Amount of Each Receipt this Period Transaction ID: 30037664 Amount of Each Receipt This Period Sould Amount of Each Receipt This Period Transaction ID: 30037664 Amount of Each Receipt NY 12503-614 Amount of Each Receipt NY 12503-614 Amount of Each Receipt NY 12503-614 Amount of Each Receipt NY 12501-124 Amount	∠ A .	Dr. Richard Friedland Mailing Address 57 Kingwood Dr City		·	0 1 1 3 2 0 1 0 Transaction ID: 33037662
Primary		federal political committee.	Occupation		500.00
B. Dr. W Zev Goldstein Mailing Address Vassar Brothers Hospital 31 Reade PI City State Zip Code Poughkeepsie NY 12601-3990 FEC ID number of contributing federal political committee. Primary General Other (specify) ▼ C C Diagnostic Radiologist Full Name (Last, First, Middle Initial) Cr. Dr. Philip Amatulle Mailing Address 14 Angela Ct City State Zip Code Hopewell Jct NY 12533-6144 FEC ID number of contributing federal political committee. Cr. Diagnostic Radiologist Community State Zip Code NY 12533-6144 FEC ID number of contributing federal political committee. Cr. Diagnostic Radiologist Receipt For: Diagnostic Radiologist Aggregate Year-to-Date ▼ Diagnostic Radiologist Receipt For: Diagnostic Radiologist Receipt For: Primary General Other (specify) ▼ State Sign S	_	Primary General Other (specify) ▼	Aggregate		
FEC ID number of contributing federal political committee. Name of Employer DRA Imaging, P.C. Name of Employer DRA Imaging, P.C. Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Dr. Philip Amatulle Mailing Address 14 Angela Ct City State Zip Code Hopewell Jct NY 12533-6144 FEC ID number of contributing federal political committee. Name of Employer DRA Imaging, P.C. Name of Employer DRA Imaging, P.C. Receipt For: Primary General Occupation Diagnostic Radiologist Aggregate Year-to-Date ▼ Aggregate Year-to-Date ▼ Occupation Diagnostic Radiologist Aggregate Year-to-Date ▼ Other (specify) ▼ Aggregate Year-to-Date ▼ Other (specify) ▼ Aggregate Year-to-Date ▼	B.	Dr. W Zev Goldstein Mailing Address Vassar Brothers Hosp 31 Reade Pl		Zip Code	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
DRA Imaging, P.C. Diagnostic Radiologist Aggregate Year-to-Date ▼		FEC ID number of contributing federal political committee.	C		
C. Dr. Philip Amatulle Mailing Address 14 Angela Ct City State Zip Code Hopewell Jct NY 12533-6144 FEC ID number of contributing federal political committee. Name of Employer DRA Imaging, P.C. Primary General Other (specify) ▼ Date of Receipt Transaction ID: 33037664 Amount of Each Receipt this Period C 500.00		Receipt For: Primary General	Diagnos	tic Radiologist e Year-to-Date ▼	
Hopewell Jct FEC ID number of contributing federal political committee. Name of Employer DRA Imaging, P.C. Receipt For: Primary Other (specify) ▼ NY 12533-6144 Amount of Each Receipt this Period C Sound of Each Receipt this Period Agoregate Year-to-Date Agoregate Year-to-Date 500.00	С.	Dr. Philip Amatulle Mailing Address 14 Angela Ct			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Receipt For: Primary General Other (specify) ▼ Diagnostic Radiologist Aggregate Year-to-Date ▼ 500.00		Hopewell Jct FEC ID number of contributing	NY	·	Amount of Each Receipt this Period
Primary General Other (specify) ▼ 500.00					
1250.00		Primary General	Aggregate		
SUBTOTAL of Receipts This Page (optional)		SUBTOTAL of Receipts This Page (optional) .			1250.00

I	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 43 / 70 (check only one) X
7	Any information copied from such Reports and State of for commercial purposes, other than using the report of NAME OF COMMITTEE (In Full) American College of Radiology Associa	name and add	dress of any political committee to	on for the purpose of soliciting contributions osolicit contributions from such committee.
A .	Full Name (Last, First, Middle Initial) Dr. Donald Lien Mailing Address 11 Moon Stone Ln City Lagrangeville FEC ID number of contributing federal political committee. Name of Employer DRA Imaging, P.C. Receipt For: Primary General Other (specify)	<u> </u>	Zip Code 12540-6243 on tic Radiologist e Year-to-Date ▼ 500.00	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
-	Full Name (Last, First, Middle Initial) Dr. Bryan Yen Mailing Address Vassar Brothers Hosp 45 Reade Pl City Poughkeepsie FEC ID number of contributing federal political committee. Name of Employer DRA Imaging, P.C. Receipt For: Primary General Other (specify)	· · ·	Zip Code 12601-3990 on tic Radiologist e Year-to-Date ▼ 500.00	Date of Receipt M M J D D J Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Full Name (Last, First, Middle Initial) Dr. Joseph Antonio Mailing Address 60 Michaels Ln City Poughkeepsie FEC ID number of contributing federal political committee. Name of Employer DRA Imaging, P.C. Receipt For: Primary General Other (specify)		Zip Code 12603-6352 on tic Radiologist e Year-to-Date ▼ 500.00	Date of Receipt M M M / D D / Y Y Y Y Y O 1 1 3 2 0 1 0 Transaction ID: 33037667 Amount of Each Receipt this Period 500.00
	SUBTOTAL of Receipts This Page (optional)]	1500.00

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 44 / 70 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Ai	ny information copied from such Reports and S for commercial purposes, other than using the	Statements ma e name and ad	ly not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American College of Radiology Association	ciation Politic	cal Action Committee	
Д .	Full Name (Last, First, Middle Initial) Dr. Benjamin Seckler			Date of Receipt
	Mailing Address Hudson Valley Radiolo 1 Columbia St FL 1	ogists		01 13 2010
	City	State	Zip Code	Transaction ID: 33037668
	Poughkeepsie	NY	12601-3924	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer DRA Imaging, P.C.	Occupation Diagnost	on tic Radiologist	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary ☐ General Other (specify) ▼		500.00	
— В.	Full Name (Last, First, Middle Initial) Dr. Emil Shih			Date of Receipt
	Mailing Address 14 Hilee Rd			01 13 2010
	City	State	Zip Code	Transaction ID: 33037669
	Rhinebeck	NY	12572-2347	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer DRA Imaging, P.C.	Occupation Diagnost	on tic Radiologist	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary ☐ General Other (specify) ▼		500.00	
 C.	Full Name (Last, First, Middle Initial) Dr. Shashidhar Reddy			Date of Receipt
	Mailing Address 152 Brandon Terrace			M M / D D / Y Y Y Y Y Y Y 1 1 3 2 0 1 0
	City	State	Zip Code	Transaction ID: 33037670
	Albany	NY	12203-6003	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer DRA Imaging, P.C.	Occupation Diagnos	on tic Radiologist	
	Receipt For: Primary General	Aggregate	e Year-to-Date ▼	-
	Other (specify)		250.00	
	UBTOTAL of Receipts This Page (optional)	1		1250.00
	OTAL This Period (last page this line number		<u> </u>	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 45 / 70 (check only one) X 11a
Any information copied from such Reports and Si or for commercial purposes, other than using the	tatements ma name and ad	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American College of Radiology Association	ation Politic	al Action Committee	
Full Name (Last, First, Middle Initial) Dr. Michael Bromley			Date of Receipt
Mailing Address 21 Stonewall Farm Rd			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 33037671
Mahopac	NY	10541-2620	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		500.00
Name of Employer DRA Imaging, P.C.	Occupatio	n ic Radiologist	7
Receipt For:		e Year-to-Date ▼	
Primary General Other (specify) ▼	1.59.5940	500.00	
Full Name (Last, First, Middle Initial) Dr. Bruce Gendron	l		Date of Receipt
Mailing Address 27 Timberline Dr			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 33037672
<u>Poughkeepsie</u>	NY	12603-5532	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		500.00
Name of Employer DRA Imaging, P.C.	Occupatio Diagnost	n ic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Dr. Jonathan Jay Crystal			Date of Receipt
Mailing Address 110 Canaan Rd			0 1 1 3 2 0 1 0
City	State	Zip Code	Transaction ID: 33037673
New Paltz	NY	12561-2807	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		500.00
Name of Employer DRA Imaging, P.C.	Occupatio Diagnost	n ic Radiologist	
Receipt For: Primary General Other (specify)	,	e Year-to-Date ▼ 500.00	
SUBTOTAL of Receipts This Page (optional)			1500.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 46 / 70 (check only one) X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports ar or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American College of Radiology Ass	d Statements may not be sold or used by any person the name and address of any political committee to ociation Political Action Committee	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Dr. Adam Federman Mailing Address 7 Saint Johns Pkwy City Poughkeepsie FEC ID number of contributing federal political committee. Name of Employer DRA Imaging, P.C. Receipt For: Primary General	State Zip Code NY 12601-5115 C Occupation Diagnostic Radiologist Aggregate Year-to-Date 250.00	Date of Receipt M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Dr. David Krakowski Mailing Address 40 S Brett St City Beacon FEC ID number of contributing federal political committee. Name of Employer DRA Imaging, P.C.	State Zip Code NY 12508-3038 C	Date of Receipt M M M / D D / Y Y Y Y Y O 1 1 3 2 0 1 0 Transaction ID: 33037676 Amount of Each Receipt this Period 250.00
Receipt For: Primary Other (specify) ▼ Full Name (Last, First, Middle Initial) Dr. Jon Lewis Mailing Address 20 Chelsea Ridge D	•	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Wappingers Falls FEC ID number of contributing federal political committee. Name of Employer DRA Imaging, P.C. Receipt For: Primary General Other (specify)	State Zip Code NY 12590-5634 C Occupation Diagnostic Radiologist Aggregate Year-to-Date 250.00	Transaction ID: 33037677 Amount of Each Receipt this Period 250.00
SUBTOTAL of Receipts This Page (optional)	750.00

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 47 / 70 (check only one) X 11a 11b 11c 12 13 14 15 16		
, A	ny information copied from such Reports and r for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements ma ne name and ad	y not be sold or used by any persidress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.		
	American College of Radiology Assor	ciation Politic	al Action Committee			
	Full Name (Last, First, Middle Initial) Dr. Shane Kudela					
	Mailing Address 1061 Shady Creek Ct	t 		01 13 / 2010		
	City Bogart	State GA	Zip Code	Transaction ID: 33037686		
	FEC ID number of contributing federal political committee.	C	30622-3098	Amount of Each Receipt this Period 500.00		
	Name of Employer Athens Radiology Associat- es	Occupatio	n tic Radiologist			
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00	7		
_	Full Name (Last, First, Middle Initial) Dr. Donald Hulnick Mailing Address 72 Golf Ln			Date of Receipt		
		01 14 2010				
	City	State	Zip Code	Transaction ID: 33048310		
	Ridgefield FEC ID number of contributing federal political committee.	CT	06877-4838	Amount of Each Receipt this Period 250.00		
	Name of Employer Danbury Radiological Asso- c.	Occupation Diagnost	n tic Radiologist			
	Receipt For:	Aggregate	e Year-to-Date 🔻			
	Primary General Other (specify) ▼	0 0	250.00			
_	Full Name (Last, First, Middle Initial) Dr. Daniel Becker			Date of Receipt		
	Mailing Address 6081 Woodway Dr			0 1 1 4 2 0 1 0		
	City	State	Zip Code	Transaction ID: 33048327		
	Memphis	TN	38120-3110	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C		300.00		
	Name of Employer Mid South Imaging, P.C.	-	tic Radiologist			
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 300.00			
	SUBTOTAL of Receipts This Page (optional)			1050.00		

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	X)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 48 / 70 (check only one) X
Any information copied from such Reports a or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American College of Radiology As	g the name and add	dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Dr. Drew Lambert Mailing Address 3311 S Massachus	setts St		Date of Receipt
City Seattle	State WA	Zip Code 98144-4029	Transaction ID: 33048330 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		250.00
Name of Employer Group Health Cooperative Receipt For: Primary Other (specify)	, '	ic Radiologist Year-to-Date 250.00	
Full Name (Last, First, Middle Initial) Dr. Polly Hansen Mailing Address 220 Robledo Verde	e St		Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 33048331
San Antonio	TX	78232-1114	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.			500.00
Name of Employer M&S Imaging Associates		ic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Dr. Eleanor Smergel	•		Date of Receipt
Mailing Address 315 Evans Ave			01 14 2010
City	State	Zip Code	Transaction ID: 33048332
Haddonfield FEC ID number of contributing federal political committee.	C	08033-3807	Amount of Each Receipt this Period 250.00
Name of Employer Tenet Health Corp.	Occupation Diagnost	n ic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page (option	al)		1000.00

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 49 / 70 (check only one) X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports and S or for commercial purposes, other than using the	Statements ma e name and ad	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American College of Radiology Assoc	iation Politic	cal Action Committee	
Α.	Full Name (Last, First, Middle Initial) Dr. Justine Dautenhahn			Date of Receipt
	Mailing Address 149 Lake Aluma Drive	•		01 14 2010
	City Oklahoma City	State OK	Zip Code 73121-3401	Transaction ID: 33048333
	FEC ID number of contributing federal political committee.	C	73121-3401	Amount of Each Receipt this Period 500.00
	Name of Employer Norman Radiology Services, Inc.	Occupation Diagnost	on tic Radiologist	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00	
ь. В.	Full Name (Last, First, Middle Initial) Dr. J Randall Jester	<u> </u>		Date of Receipt
	Mailing Address 5227 Lee Ave			01 14 2010
	City	State	Zip Code	Transaction ID: 33048360
	Downers Grove FEC ID number of contributing	C	60515-4303	Amount of Each Receipt this Period 500.00
	federal political committee.			300.00
	Name of Employer Self-employed	Occupation Diagnost	on tic Radiologist	
	Receipt For:	Aggregate	e Year-to-Date	
	Primary General Other (specify) ▼		500.00	
С. С.	Full Name (Last, First, Middle Initial) Dr. Kambiz Shamlou			Date of Receipt
	Mailing Address 1507 Oak Forest Dr			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: 33153036
	Ormond Beach	FL	32174-3409	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer Radiology Associates	Occupation Diagnost	on tic Radiologist	
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 250.00	
	SUBTOTAL of Receipts This Page (optional)			1250.00
ŀ	TOTAL This Period (last page this line number		<u> </u>	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 50 / 70 (check only one) X 11a
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American College of Radiology Associ	name and add	dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Dr. Douglas Wester, JR Mailing Address 2405 Covemont Dr SE City Huntsville FEC ID number of contributing federal political committee. Name of Employer Radiology Associates of Huntsville Receipt For: Primary General Other (specify)	State AL C Occupation Diagnost	ic Radiologist Year-to-Date ▼ 500.00	Date of Receipt M M M / D D / Y Y Y Y Y O 1 1 5 2 0 1 0 Transaction ID: 33153038 Amount of Each Receipt this Period 500.00
Full Name (Last, First, Middle Initial) Dr. Darrin Johnson Mailing Address 1701 Drake Ave City Huntsville FEC ID number of contributing federal political committee. Name of Employer Radiology of Huntsville Receipt For: Primary General Other (specify)	,	Zip Code 35802-1042 n ic Radiologist Year-to-Date ▼ 250.00	Date of Receipt M M / D D / Y Y Y Y O 1 1 5 2 0 1 0 Transaction ID: 33153099 Amount of Each Receipt this Period 250.00
Full Name (Last, First, Middle Initial) Dr. Michael George Mailing Address 1620 John St S City Salem FEC ID number of contributing federal political committee. Name of Employer Salem Radiology Consultants Receipt For: Primary General Other (specify)	. '	Zip Code 97302-5110 n ic Radiologist Year-to-Date ▼	Date of Receipt M M M / D D / Y Y Y Y Y O 1 1 5 2 0 1 0 Transaction ID: 33153101 Amount of Each Receipt this Period 250.00
SUBTOTAL of Receipts This Page (optional))	1000.00

SCHEDULE A	•	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 51 / 70 (check only one) X 11a
or for commercial purpo	ses, other than using the name ar	nd address of any political committee to	on for the purpose of soliciting contributions a solicit contributions from such committee.
Full Name (Last, First Dr. Paul Ellenbogen Mailing Address 6 City Dallas FEC ID number of confederal political community ven specialis Receipt For: Primary Other (specify)	Sta TX ontributing mittee. & Inter- General General	te Zip Code 75254-8613 Ipation Inostic Radiologist egate Year-to-Date 208.34	Date of Receipt M M M / D D / Y Y Y Y Y O 1 1 5 2 0 1 0 Transaction ID: 33154669 Amount of Each Receipt this Period 208.34
	legional Diagnostic Radiology 406 6th Ave N Sta MN ontributing nittee. Radio- General General	te Zip Code	Date of Receipt M M M / D D / Y Y Y Y Y O 1 15 2010 Transaction ID: 33155145 Amount of Each Receipt this Period 208.34
Full Name (Last, First Dr. Craig Glick Mailing Address 9) City Ventnor FEC ID number of c federal political common Name of Employer Atlantic Medical Imark Receipt For: Primary Other (specify)	Of N Cornwall Ave Sta NJ ontributing nittee. Ging Occu Diag Aggr General	te Zip Code 08406-1116 pation nostic Radiologist egate Year-to-Date 1000.00	Date of Receipt M M / D D / Y Y Y Y Y O 1 1 5 2 0 1 0 Transaction ID: 33156225 Amount of Each Receipt this Period 1000.00
SUBTOTAL of Receip	ts This Page (optional)		1416.68

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 52 / 70 (check only one) X 11a
Any information copied from such Reports and or for commercial purposes, other than using	d Statements may not be sold or used by any personant the name and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American College of Radiology Ass	ociation Political Action Committee	
Full Name (Last, First, Middle Initial) Dr. James Newcomb		Date of Receipt
Mailing Address 1425 Princeton Ct	Ctata 7in Cada	0 1
City Allentown	State Zip Code PA 18104-2247	Transaction ID: 33156226 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	365.00
Name of Employer Medical Imaging of Lehigh Valley	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 365.00	
Full Name (Last, First, Middle Initial) Dr. Derek Jakes		Date of Receipt
Mailing Address 4755 Health Hill Rd		0 1 1 5 2 0 1 0
City	State Zip Code	Transaction ID: 33156228
Columbia	SC 29206-4610	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Pitts Radiology	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Dr. Sarah Bochar		Date of Receipt
Mailing Address 85 N Devereux Ct N	W	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 33156229
Atlanta	GA 30327-4225	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer Quantum Radiology	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
		1865.00
SUBTOTAL of Receipts This Page (optional)	1000.00
TOTAL This Period (last page this line numb	per only)	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 53 / 70 (check only one) X
or for commercial purposes, other than using NAME OF COMMITTEE (In Full)	nd Statements may not be sold or used by any pers g the name and address of any political committee to sociation Political Action Committee	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Dr. Julie Timins Mailing Address 20 Footes Ln		Date of Receipt
City Morristown FEC ID number of contributing	State Zip Code NJ 07960-6356	Transaction ID: 33195301 Amount of Each Receipt this Period
Receipt For:	Occupation Diagnostic Radiologist Aggregate Year-to-Date ▼	1000.00
Primary General Other (specify) Full Name (Last, First, Middle Initial) Dr. Carl Schultz	1000.00	Date of Receipt
Mailing Address 1424 N Laurel Ave		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 33195302
Upland FEC ID number of contributing federal political committee.	CA 91786-2765	Amount of Each Receipt this Period 500.00
Name of Employer San Antonio Radiological Medical Group Receipt For: Primary General Other (specify) ▼	Occupation Diagnostic Radiologist Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Dr. W Caldwell Sims	1	Date of Receipt
Mailing Address 1680 N San Antoni	io Ave	0 1 2 1 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 33195303
Upland FEC ID number of contributing federal political committee.	CA 91784-1854	Amount of Each Receipt this Period 250.00
Name of Employer Renaissance Radiology Med- ical Group, I Receipt For:	Occupation Diagnostic Radiologist Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	250.00	
SUBTOTAL of Receipts This Page (option	al)	1750.00

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 54 / 70 (check only one) X 11a 11b 11c 12 13 14 15 16 11
or for commercial purposes, other than usin NAME OF COMMITTEE (In Full)	and Statements may not be sold or used by any persong the name and address of any political committee to association Political Action Committee	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Dr. T Sistrunk Mailing Address Georgia West Ima 605 Dixie St	iging	Date of Receipt 0 1 2 1 2 0 1 0
City	State Zip Code	Transaction ID: 33195304
Carrollton FEC ID number of contributing federal political committee.	GA 30117-4505	Amount of Each Receipt this Period 500.00
Name of Employer GA West Imaging, P.C.	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Dr. Edward Farmlett		Date of Receipt
Mailing Address 33 Round Bay Rd		01 21 2010
City Laconia	State Zip Code NH 03246-2650	Transaction ID: 33195310 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Seacoast Radiology, P.A.	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Dr. Dean Tyrell	I	Date of Receipt
Mailing Address 6215 Elliott Ct		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Coopersburg	State Zip Code PA 18036-9743	Transaction ID: 33195314 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	300.00
Name of Employer Progressive Physician Ass- ociates	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	
SUBTOTAL of Receipts This Page (option	nal)	1050.00

	E A (FEC Form 3X) RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 55 / 70 (check only one) X
or for commercia	copied from such Reports and St al purposes, other than using the OMMITTEE (In Full) College of Radiology Associa	name and add	dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Dr. Ronald W. Mailing Addre City Leawood FEC ID number federal politic Name of Empalliance Radi Receipt For: Primary	per of contributing al committee.		ic Radiologist Year-to-Date ▼ 5000.00	Date of Receipt M M M / D D / Y Y Y Y Y O 1
Full Name (L. Dr. Joseph Ad Mailing Address City Austin FEC ID number federal politics Name of Empartment Austin Medical Receipt For:	per of contributing al committee.	,	Zip Code 55912-5522 n ic Radiologist y Year-to-Date ▼	Date of Receipt M M / D D / Y Y Y Y Y O 1 2 1 2 0 1 0 Transaction ID: 33195317 Amount of Each Receipt this Period 500.00
Full Name (L. Dr. Aloyzas Pa Mailing Address City Naperville	ast, First, Middle Initial) akalniskis ass 1619 Kaimi Court per of contributing al committee.	State IL C Occupation Diagnost	Zip Code 60563-1497	Date of Receipt M M
	General specify) ▼ Receipts This Page (optional)	Aggregate	e Year-to-Date ▼ 500.00	6000.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 56 / 70 (check only one) X 11a 11b 11c 12
Any information copied from such Reports and or for commercial purposes, other than using t	d Statements may not be sold or used by any pershe name and address of any political committee to	13 14 15 16 son for the purpose of soliciting contributions to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American College of Radiology Asso		
Full Name (Last, First, Middle Initial) Dr. Raymond Lee		Date of Receipt
Mailing Address 7308 Wentworth Dr		01 21 2010
City	State Zip Code	Transaction ID: 33195346
Springfield	IL 62711-7085	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer Clinical Radiologists	Occupation Diagnostic Radiologist	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	1000.00	
Full Name (Last, First, Middle Initial) Dr. Layne Clemenz		Date of Receipt
Mailing Address 725 River Rd		M M / D D / Y Y Y Y Y O D D / 21 2010
City	State Zip Code	Transaction ID: 33195347
Columbia	SC 29212-8809	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	2500.00
Name of Employer Lexington Radiology Assoc- iates	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00	
Full Name (Last, First, Middle Initial) Dr. Mark Malley		Date of Receipt
Mailing Address 14105 NW 74th St		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 33195348
Kansas City	MO 64152-5115	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Imaging for Women LLC	Occupation Diagnostic Radiologist	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	500.00	
SUBTOTAL of Receipts This Page (optional)		4000.00

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for cornormerical purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (in Full) Anerican College of Radiology Association Political Action Committee Full Name (Last, First, Middle Initial) Dr. Cody Ox Mailing Address 4702 111th St City State Zip Code TX 79424-7359 FEC ID number of contributing federal political committee. Name of Employer Political Committee Full Name (Last, First, Middle Initial) Dr. Scott Burstein Mailing Address 4506 Oakwood Avenue City State Zip Code Ty Ty State Zip Code Ty Ty State Zip Code Ty T	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 57 / 70 (check only one) X 11a 11b 11c 12 13 14 15 16 17
A. Dr. Cody Cox Mailing Address 4702 111th St City State Zip Code Lubbock TX 79424-7359 FEC ID number of contributing federal political committee. Name of Employer Dupage Radiologists S.C. Receipt For: Pfimary General Other (specify) ▼ Cocupation Diagnostic Radiologist State Zip Code Transaction ID: 33195355 Amount of Each Receipt this Period Date of Receipt Transaction ID: 33195357 Date of Receipt this Period Transaction ID: 33195357 Amount of Each Receipt this Period Transaction ID: 33195357 Amount of Each Receipt this Period Date of Receipt this Period Transaction ID: 33195357 Date of Receipt this Period Date of Receipt this Period Transaction ID: 33195357 Date of Receipt this Period Diagnostic Radiologists Receipt For: Primary General Occupation Diagnostic Radiologist Date of Receipt this Period Transaction ID: 33195358 Amount of Each Receipt this Period Transaction ID: 33195358 Amount of Each Receipt this Period Transaction ID: 33195358 Amount of Each Receipt this Period Date of Receipt Transaction ID: 33195358 Transaction ID: 33195358 Amount of Each Receipt this Period Date of Receipt Transaction ID: 33195358 Amount of Each Receipt this Period Transaction ID: 33195358 Amount of Each Receipt this Period Transaction ID: 33195338 Amount of Each Receipt this Period Transaction ID: 33195338 Transaction ID: 33195358 Transaction ID: 31	or for commercial purposes, other than using t	he name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
Date of Receipt Date of Receipt	Mailing Address 4702 111th St City Lubbock FEC ID number of contributing federal political committee. Name of Employer Lubbock Diagnostic Radiology Receipt For: Primary General	TX 79424-7359 C Occupation Diagnostic Radiologist Aggregate Year-to-Date ▼	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Primary General Other (specify) ▼ Pull Name (Last, First, Middle Initial) Dr. Brian Moffit Mailing Address PO Box 2022 City State Zip Code Rancho Santa Fe CA 92067-2022 FEC ID number of contributing federal political committee. Name of Employer Radiology Medical Group Receipt For: Primary General Date of Receipt Transaction ID: 33195358 Amount of Each Receipt this Period C 500.00	Full Name (Last, First, Middle Initial) Dr. Scott Burstein Mailing Address 4506 Oakwood Aver City Downers Grove FEC ID number of contributing federal political committee. Name of Employer Dupage Radiologists S.C.	State Zip Code IL 60515-2710 C Occupation Diagnostic Radiologist	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Receipt For: Primary General Aggregate Year-to-Date FOO OO	Primary General Other (specify) Full Name (Last, First, Middle Initial) Dr. Brian Moffit Mailing Address PO Box 2022 City Rancho Santa Fe FEC ID number of contributing	250.00 State Zip Code CA 92067-2022	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (optional)	Receipt For: Primary General Other (specify) ▼	Diagnostic Radiologist Aggregate Year-to-Date ▼ 500.00	1250.00

Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American College of Radiology Asso	ne name and ad	y not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions
,	ciation Politic	al Action Committee	o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Dr. Scott Miller Mailing Address Major Hospital 150 W Washington S			Date of Receipt 0 1 2 1 2 0 1 0
City	State	Zip Code	Transaction ID: 33195368
Shelbyville	IN	46176-1265	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		250.00
Name of Employer X-Ray Physicians of Shelb- yville	Occupatio Diagnost	n tic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Dr. Robert Duke	N.		Date of Receipt
Mailing Address 9300 Ingleside Farm	N		01 21 2010
City	State	Zip Code	Transaction ID: 33195485
Germantown	TN	38139-6713	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		500.00
Name of Employer Diagnostic Imaging, P.C.	_ ·	tic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Dr. Charles Perme			Date of Receipt
Mailing Address 800 Apple Hill Rd			01 21 2010
City	State	Zip Code	Transaction ID: 33195486
Cincinnati	OH	45230-7002	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		500.00
Name of Employer Anderson Radiology Associ- ates	, ' 	tic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00	
SUBTOTAL of Receipts This Page (optional)			1250.00

SCHEDULE A (FE	•	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 59 / 70 (check only one) X 11a
or for commercial purposes NAME OF COMMITTEE	, other than using the name and a	ddress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, MDr. Gerald Smidebush Mailing Address 6570 City Canal Winchester FEC ID number of contrifederal political committee Name of Employer Fairfield Imaging Assocites Receipt For:	State OH buting be. Occupati Diagnos	Zip Code 43110-1254 on stic Radiologist te Year-to-Date ▼	Date of Receipt M M M / D D / Y Y Y Y Y O 1 2 1 2 0 1 0 Transaction ID: 33195488 Amount of Each Receipt this Period 500.00
Full Name (Last, First, MDr. Thomas Warfel Mailing Address 2213	liddle Initial) NE 160th Ave	500.00	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Vancouver FEC ID number of contrifederal political committee Name of Employer Radiology Specialists of the Northwest Receipt For: Primary Other (specify)	Occupati Diagnos	Zip Code 98684-4501 on stic Radiologist te Year-to-Date 400.00	Amount of Each Receipt this Period 400.00
Full Name (Last, First, MDr. R Terrell Frey Mailing Address 8700 City Cincinnati FEC ID number of contrifederal political committee	Deep Run Ln State OH buting	Zip Code 45243-1164	Date of Receipt M M M
Name of Employer Medical X-Ray, Inc. Receipt For: Primary Other (specify)		on stic Radiologist te Year-to-Date ▼ 2500.00	
SUBTOTAL of Receipts T	his Page (optional)		3400.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 60 / 70 (check only one) X 11a 11b 11c 12 13 14 15 16 11
Any information copied from such Reports and or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American College of Radiology Assi	d Statements may not be sold or used by any perso the name and address of any political committee to ociation Political Action Committee	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Dr. Richard Rowley Mailing Address St Peter's Hospital 315 S Manning Blvd	State Zip Code	Date of Receipt M M
Albany FEC ID number of contributing federal political committee.	NY 12208-1707	Amount of Each Receipt this Period 500.00
Name of Employer Primecare Physicians Receipt For: Primary General Other (specify) ▼	Occupation Diagnostic Radiologist Aggregate Year-to-Date 500.00	
Full Name (Last, First, Middle Initial) Dr. Andrew Loesberg Mailing Address 8 Friar Tuck Ct City	State Zip Code	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y
Warren FEC ID number of contributing federal political committee.	NJ 07059-6755	Amount of Each Receipt this Period 300.00
Name of Employer Hunterdow Radiology Associates Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼	Occupation Diagnostic Radiologist Aggregate Year-to-Date 300.00	
Full Name (Last, First, Middle Initial) Dr. James Junker Mailing Address 16 Fox Meadows		Date of Receipt
City Saint Louis FEC ID number of contributing	State Zip Code MO 63127-1401	Transaction ID: 33195553 Amount of Each Receipt this Period 500.00
Name of Employer Scott Radiological Group, Inc. Receipt For:	Occupation Diagnostic Radiologist Aggregate Year-to-Date	
Primary General Other (specify) ▼	500.00	
SUBTOTAL of Receipts This Page (optional)	1300.00

ITEMIZED RE	(FEC Form 3X) CEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 61 / 70 (check only one)
Any information copie or for commercial put	d from such Reports and Sta poses, other than using the r	atements may	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COM	IITTEE (In Full)			
American Colle	ge of Radiology Associa	tion Politic	al Action Committee	
Full Name (Last, I	First, Middle Initial)			Date of Receipt
Mailing Address	Vancouver Radiologists 505 NE 87th Ave Ste LL			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City		State	Zip Code	Transaction ID: 33195568
Vancouver		WA	98664-4899	Amount of Each Receipt this Period
FEC ID number o federal political co		C		500.00
Name of Employe Vancouver Radio	ogists PC	Occupation Diagnost	n ic Radiologist	
Receipt For: Primary Other (spec	General	Aggregate	Year-to-Date ▼ 500.00	
Full Name (Last, I	First, Middle Initial)			Date of Receipt
Mailing Address	401 Lakeshore Dr			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City		State	Zip Code	Transaction ID: 33195569
<u>Fayetteville</u>		NC	28305-5210	Amount of Each Receipt this Period
FEC ID number of federal political co		С		500.00
Name of Employe Carolina Regiona gy	Radiolo-	Occupation Diagnost	n ic Radiologist	
Receipt For:		Aggregate	e Year-to-Date ▼	
Primary Other (spec	☐ General ify) ▼		500.00	
Full Name (Last, I Dr. Mary Peterson	First, Middle Initial)			Date of Receipt
	15401 Sweetwater Ct			01 21 2010
City		State	Zip Code	Transaction ID: 33195570
Fort Myers		FL	33912-2353	Amount of Each Receipt this Period
FEC ID number of federal political co		C		1000.00
Name of Employe Radiology Region	al Center	Occupation Diagnost	n ic Radiologist	
Receipt For:			Year-to-Date ▼	
Primary Other (spec	☐ General ify) ▼		1000.00	

	HEDULE A (FEC Form 3X) MIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 62 / 70 (check only one) X
or for	nformation copied from such Reports and S commercial purposes, other than using the AME OF COMMITTEE (In Full) merican College of Radiology Assoc	e name and ad	dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Fı	ull Name (Last, First, Middle Initial) r. Daniel Miles		ar / Guisir Gommittee	Date of Receipt
_	ailing Address 3554 John Anderson I	Dr		M M / D D / Y Y Y Y Y Y O D D / 21 2010
C	ity	State	Zip Code	Transaction ID: 33195571
<u>C</u>	ormond Beach	FL	32176-2114	Amount of Each Receipt this Period
	EC ID number of contributing deral political committee.	C		500.00
R	ame of Employer adiology Associates of aytona Beach	Occupation Diagnost	n tic Radiologist	
	eceipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 500.00	
	ull Name (Last, First, Middle Initial) r. Michelle Kraut			Date of Receipt
M 	ailing Address 24 E Glenbrooke Cir			01 21 2010
	ity	State	Zip Code	Transaction ID: 33195572
<u>R</u>	lichmond	VA	23229-8033	Amount of Each Receipt this Period
	EC ID number of contributing deral political committee.	C		1000.00
	ame of Employer lichelle Kraut, M.D., PLLC	, · · · · ·	tic Radiologist	
R	eceipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1000.00	
	ull Name (Last, First, Middle Initial) r. Stephen Sevigny			Date of Receipt
M	ailing Address 1325 Oak Forest Dr			01 21 2010
	ity	State	Zip Code	Transaction ID: 33195573
_	ormond Beach	<u>FL</u>	32174-4023	Amount of Each Receipt this Period
	EC ID number of contributing deral political committee.	C		1000.00
R <u>D</u>	ame of Employer adiology Associates of aytona Beach	, ' 	tic Radiologist	
R ₍	eceipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1000.00	
	RTOTAL of Receipts This Page (optional) .	1		2500.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 63 / 70 (check only one) X 11a
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American College of Radiology Associations (In Full)	e name and add	dress of any political committee to	on for the purpose of soliciting contributions a solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Dr. John Gianini Mailing Address 485 Chelsea Place Av City Ormond Beach FEC ID number of contributing federal political committee. Name of Employer Radiology Imaging Associates	State FL C	Zip Code 32174-0688 n ic Radiologist	Date of Receipt M M M
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 250.00]
Full Name (Last, First, Middle Initial) Dr. Charles Tate, III Mailing Address 1090 SW 15th St			Date of Receipt O 1
City <u>Boca Raton</u> FEC ID number of contributing federal political committee.	State FL C	Zip Code 33486-6858	Transaction ID: 33349256 Amount of Each Receipt this Period 250.00
Name of Employer Radiologists of N. Ft. La- uderdale, PA Receipt For: Primary General Other (specify) ▼	<u> </u>	n ic Radiologist Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Dr. David Hassell			Date of Receipt
Mailing Address Radiology Associates 6576 Airport Blvd Bld City	of Mobile g C Ste 2 State	Zip Code	0 1 3 1 2 0 1 0 Transaction ID: 33349258
Mobile FEC ID number of contributing	AL	36608-3786	Amount of Each Receipt this Period 182.50
federal political committee. Name of Employer Radiology Associates of Mobile	Occupation	n ic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 682.50	
SUBTOTAL of Receipts This Page (optional)	1		682.50

A.

PAGE 64 / 70 FOR LINE NUMBER: SCHEDULE A (FEC Form 3X) Use separate schedule(s) (check only one) for each category of the **ITEMIZED RECEIPTS** 11a 11b 11c **Detailed Summary Page** 13 14 16 17 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American College of Radiology Association Political Action Committee Full Name (Last, First, Middle Initial) Date of Receipt Dr. Michael DeVenny Mailing Address 3090 Yorktown Dr 0.1 3 1 2010 City State Zip Code Transaction ID: 33349259 <u>Tuscaloosa</u> 35406-2713 Αl Amount of Each Receipt this Period FEC ID number of contributing 250.00 C federal political committee. Name of Employer The Radiology Clinic Occupation Diagnostic Radiologist Receipt For: Aggregate Year-to-Date General Primary 250.00 Other (specify) Full Name (Last, First, Middle Initial) В. Dr. William Herrington Date of Receipt Mailing Address 1110 Laurel PI 0 1 31 2010 City State Zip Code Transaction ID: 33349260 **Athens** GA 30606-5789 Amount of Each Receipt this Period FEC ID number of contributing C 625.00 federal political committee. Name of Employer Athens Radiology Associat-Occupation Diagnostic Radiologist Receipt For: Aggregate Year-to-Date Primary General 625.00

SUBTOTAL of Receipts This Page (optional)	•	875.00
TOTAL This Period (last page this line number only)	<u> </u>	133816.33

Other (specify)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 65 / 70 (check only one) 11a 11b 11c 12 13 14 15 X 16 17
Any information copied from such Reports and St or for commercial purposes, other than using the		
NAME OF COMMITTEE (In Full) American College of Radiology Associa	ation Political Action Committee	
Full Name (Last, First, Middle Initial) Kay Granger Campaign Fund Mailing Address 715 Jones Street, Suite	101	Date of Receipt O 1
City	State Zip Code	Transaction ID: 33036565
Fort Worth	TX 76102	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C C00310532	2500.00
Name of Employer	Occupation	
Receipt For: 2010 X Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00	Refund of check #3672 because contribution was doubled.

SUBTOTAL of Receipts This Page (optional)	•	2500.00
TOTAL This Period (last page this line number only)	•	2500.00

JΤ	CHEDULE B (FEC Form 3X)	Use sepa	arate schedule(s)		NUMBER: PAGE 66 / 70
	EMIZED DISBURSEMENTS	for each	category of the Summary Page	(check on 21b 27	y one) 22 X 23 24 25 28a 28b 28c 29 3
	y Information copied from such Reports and Stater for commercial purposes, other than using the name				
	NAME OF COMMITTEE (In Full) American College of Radiology Association				
<u>/</u>	Full Name (Last, First, Middle Initial) Trager For Congress				Transaction ID: 32828803 Date of Disbursement
	Mailing Address PO Box 10033				$\begin{bmatrix} \begin{smallmatrix} M & M \\ O & 1 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ O & 4 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Q & Y & Q \\ 2 & 0 & 1 & O \end{bmatrix}$
	City Green Bay	State WI	Zip Code 54307		Amount of Each Disbursement this Perio
	Purpose of Disbursement			011	2500.00
	Candidate Name Mr. Marc Trager Office Sought: X House Disburs	ement For:	2010	Category/ Type	
	-	Primary Other (spe	General		
	Full Name (Last, First, Middle Initial) Michael Burgess For Congress				Transaction ID: 32987391 Date of Disbursement
	Mailing Address PO Box 2334				$\begin{array}{c ccccccccccccccccccccccccccccccccccc$
	City Denton	State TX	Zip Code 76202		Amount of Each Disbursement this Perio
	Purpose of Disbursement			011	2500.00
	Candidate Name Rep. Michael C. Burgess, M.D.			Category/ Type	
	Office Sought: X House Senate President State: TX District: 26	ement For: Primary Other (spe	2010 X General ecify) ▼		
	Full Name (Last, First, Middle Initial) Lonestarpac				Transaction ID: 32987392 Date of Disbursement
		250.0			$\begin{array}{c ccccccccccccccccccccccccccccccccccc$
	Mailing Address PO Box 1000 Highway 2	259 South			
	Mailing Address PO Box 1000 Highway 2 City Lone Star	State TX	Zip Code 75668		
	City Lone Star Purpose of Disbursement	State		011	Amount of Each Disbursement this Perio
	City Lone Star Purpose of Disbursement Candidate Name Lonestarpac	State TX		011 Category/ Type	
	City Lone Star Purpose of Disbursement Candidate Name Lonestarpac	State	75668 General	Category/	Amount of Each Disbursement this Period 5000.00

Use separate schedule(s)		FOR LINE (check only	E NUMBER: PAGE 67 / 70				
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	21b 27	22 X 23 24 25 2 28a 28b 28c 29				
Any Information copied from such Reports and State or for commercial purposes, other than using the nar							
NAME OF COMMITTEE (In Full) American College of Radiology Associati	on Political Action Commi	ittee					
Full Name (Last, First, Middle Initial) Friends Of Dave Reichert			Transaction ID: 33012418 Date of Disbursement				
Mailing Address P. O. Box 53322			01				
City Bellevue	State Zip Code WA 98015		Amount of Each Disbursement this Period				
Purpose of Disbursement		011	1500.00				
Candidate Name Rep. David George Reichert		Category/ Type					
Senate President	ement For: 2010 Primary X General Other (specify)						
State: WA District: 08 Full Name (Last, First, Middle Initial)			T .: ID 00040440				
Matheson For Congress			Transaction ID: 33012419 Date of Disbursement				
Mailing Address P.O. Box 521048 Suite A			01 29 7 2010				
City Salt Lake City	State Zip Code UT 84152		Amount of Each Disbursement this Period				
Purpose of Disbursement		011	1500.00				
Candidate Name Rep. James D. Matheson		Category/ Type					
Senate President	ement For: 2010 Primary X General Other (specify)						
State: UT District: 02 Full Name (Last, First, Middle Initial) Richard Burr Committee; The			Transaction ID: 33023809 Date of Disbursement				
Mailing Address Post Office Box 5928			01				
City Winston-Salem	State Zip Code NC 27113		Amount of Each Disbursement this Period				
Purpose of Disbursement		011	2000.00				
Candidate Name Sen. Richard M. Burr		Category/ Type					
X Senate President	ement For: 2010 Primary X General Other (specify)	,,					
State: NC District:							
SUBTOTAL of Disbursements This Page (optional)	5000.00				

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SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS		Use separate schedule(s) for each category of the			FOR (chec		NUMBER: PAGI					GE	68 /				
IT	EMIZED DIS	BURSEMEN	rs		category of the Summary Page		È	21b 27	22 28a	Х	23 28b		24 28c		25 29	F	26 30b
		d from such Reports a														s	
\rangle	NAME OF COMM American Colle	MITTEE (In Full) ege of Radiology A	ssociation	Political	Action Comm	ittee	!										
	,	First, Middle Initial) or Us Senate Comr PO Box 395	mittee								isburs				0 Ť (o ^Y	
	City			State	Zip Code				Amou	nt o	f Each	Dis	sburse	men	t this	Perio	od
	Wrentham Purpose of Disbui	reamont	l	MA	02093						•		•	50	00.00)	
	Candidate Name Mr. Scott Brown					Ca	ate	11 egory/			•		•				
	Office Sought: State: MA	House X Senate President District:		ment For: Primary Other (spe General2				•									
	•	First, Middle Initial)		ttee							isburs			· · · · · · · · · · · · · · · · · · ·	0 Ť (n ^Y	
		320 First Street								_							
	City Washington			State DC	Zip Code 20003				Amou	nt o	f Each	Dis	sburse	men	t this	Perio	od
	Purpose of Disbut	rsement						11 egory/						50	00.00)	
		olican Congression						/pe									
	Office Sought: State:	House Senate President District:	Disburser	ment For: Primary Other (spe	General cify) ▼												
	Full Name (Last, F	First, Middle Initial)							Trans	acti	on ID:	: 3	33148	540			
	National Repub	olican Congression	al Commi	ttee						of D	isburs		ent	,	V	V	
	Mailing Address	320 First Street							0 1	IVI	′ 🔼 1	9]	Ž	0 1 (ָר כ	
	City Washington			State DC	Zip Code 20003				Amou	nt o	f Each	Dis	sburse	-	-		od
	Purpose of Disbui	rsement				Г	_	44						50	00.00)	
	Candidate Name National Repub	olican Congression	al Commi	ttee		Ca	ate	egory/ ype									
	Office Sought:	House Senate President	Disburser	ment For: Primary Other (spe	General cify) ▼												
	State:	District:							_	_		_		_			_
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SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE	
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	(check only 21b 27	22 X 23 24 25 28 28 28 29
Any Information copied from such Reports and State or for commercial purposes, other than using the nar			
NAME OF COMMITTEE (In Full) American College of Radiology Associati			
Full Name (Last, First, Middle Initial) National Republican Congressional Com	mittee		Transaction ID: 33148622 Date of Disbursement
Mailing Address 320 First Street			$\begin{bmatrix} \begin{smallmatrix} M & M & M \\ O & 1 & M \end{bmatrix} \ \begin{bmatrix} \begin{smallmatrix} D & D \\ D & I & D \end{bmatrix} \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ Z & O & I & O \end{bmatrix} \ \end{bmatrix}$
City Washington	State Zip Code DC 20003		Amount of Each Disbursement this Period
Purpose of Disbursement Candidate Name		011 Category/	5000.00
National Republican Congressional Com	mittee sement For:	Type	
Senate President State: District:	Primary General Other (specify) ▼		
Full Name (Last, First, Middle Initial) Jesse Jackson Jr For Congress			Transaction ID: 33352037 Date of Disbursement
Mailing Address P.O. Box 490286			$\begin{bmatrix} \begin{smallmatrix} M & M \\ D & I \end{smallmatrix} \end{bmatrix} \ \ \begin{bmatrix} \begin{smallmatrix} D & D \\ D & E \end{smallmatrix} \end{bmatrix} \ \ \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y & Y \\ D & D & I & I \end{bmatrix} \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ $
City Chicago	State Zip Code IL 60649		Amount of Each Disbursement this Perio
Purpose of Disbursement		011	3000.00
Candidate Name Rep. Jesse L. Jackson, Jr.		Category/ Type	
	sement For: 2010 X Primary General Other (specify)		
Full Name (Last, First, Middle Initial) Leadership of Today & Tomorrow			Transaction ID: 33359157 Date of Disbursement
Mailing Address PO BOX 26641			$\begin{bmatrix} \begin{smallmatrix} M & M & M \\ 0 & 1 & M \end{bmatrix} \ / \ \begin{bmatrix} D & D & D \\ 2 & 9 \end{bmatrix} \ / \ \begin{bmatrix} Y & Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{bmatrix} $
City LOS ANGELES	State Zip Code CA 90026		Amount of Each Disbursement this Perio
Purpose of Disbursement		011	5000.00
Candidate Name Leadership of Today & Tomorrow		Category/ Type	
Office Sought: House Disburs Senate President State: District:	sement For: Primary General Other (specify) ▼		
SUBTOTAL of Disbursements This Page (optional)		13000.00
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SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS Any Information copied from such Reports and Statemer or for commercial purposes, other than using the name	for each category of the Detailed Summary Page (check only 21b 27) ents may not be sold or used by any person the check only 21b 27	22 23 24 25 26 28a 28b 28c X 29 30b for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) American College of Radiology Association	Political Action Committee	
Full Name (Last, First, Middle Initial) Bank of America Mailing Address P.O. Box 27025		Transaction ID: 33565107 Date of Disbursement M M M D D D D Y Y Y Y Y Y Y Y Y Y Y Y Y
,	State Zip Code VA 23261-7025 001 Category/ Type	Amount of Each Disbursement this Period 547.36
Office Sought: House Disburser Senate President State: District:	**	Bank Fees

SUBTOTAL of Disbursements This Page (optional)	•	547.36
TOTAL This Period (last page this line number only)		547.36